



**EDUCATING THROUGH AN INDIGENOUS LENS**

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## REQUEST FOR STUDENT RECORDS 2019-2020

The following student has enrolled at Bdote Learning Center, District 4226:

### Student Information:

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

### Previous School Information:

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City, State & zip: \_\_\_\_\_

School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### Previous School – Please forward the following information:

- ✓ Official School Records (name, address, birth day and/or copy of birth certificate, sex, grade level, attendance records, class rank, standardized test results, etc.)
- ✓ Special Education Records – including IEP/504 Plan or other assessments (Please fax ASAP)
- ✓ Standard Test Results/MN Basic Standards Test Results
- ✓ MARSS number or state ID number
- ✓ Legal documents
- ✓ Pre-School Screening Records
- ✓ Discipline Records including suspensions and expulsion paperwork
- ✓ Health Records – including immunizations and Sports Physical
- ✓ ELL/ESL Records

Student records should be faxed to:  
(612) 729-9412

Or emailed to:  
[info@bdote.org](mailto:info@bdote.org)

For Office Use Only

- Official Records     IEP/SPED     MARSS     Legal
- Standard test results     ESL/ELL     Pre-K Screening
- Discipline Records     Health Records

Date received: \_\_\_\_\_ Initials: \_\_\_\_\_