



Knob Noster R-VIII School District

401 E. Wimer, Knob Noster, MO 65336
Office: (660) 563-3186
Student Services: (660) 563-5597

Dr. Jerrod Wheeler, Superintendent
Mr. Michael Cohron, Assistant Superintendent
Dr. Angela Rolofson, Director, Student Services

Proud Past – Bright Future

TRANSCRIPT/RECORDS REQUEST

Subject: Authorization For Release of School Records and Other Reports

Previous School Name & Address: _____ Phone #: _____

Fax #: _____

We Request You Forward All the Following Information to the School Circled Below:

Academic/Grade Records	Achievement/Intelligence Tests	Attendance Records
Records from other districts	Copy of most recent I.E.P.	Special Ed. Testing/Placement info.
Birth Certificate	Clinical/Medical Reports	Immunization
Behavior Records that regard In-School Suspension, Out-of-School Suspension, or Expulsion		

The Missouri SAFE SCHOOLS ACT OF 1996 requires that disciplinary files from the student's previous school be reviewed prior to finalizing enrollment at our school. Therefore, we request you include a summary of the student's records which involve any type of suspension or expulsion.

Student: _____
Last Name First Name Middle Name

Grade entering: _____ Birth Date: _____ Date of Enrollment: _____

Send Records To: (Circle One)

Whiteman Elementary School	Knob Noster Elementary School	Knob Noster Middle School	Knob Noster High School
Houx Drive, Building 3015 Whiteman AFB, MO 65305	405 E. Wimer St. Knob Noster, MO 65336	211 E. Wimer St. Knob Noster, MO 65336	504 S. Washington St. Knob Noster, MO 65336
Phone (660) 563-3028	Phone (660) 563-3019	Phone (660) 563-2260	Phone (660) 563-2283
Fax (660) 563-3443	Fax (660) 563-3781	Fax (660) 563-3274	Fax (660) 563-3384
asowers@knr8.org	tbivins@knr8.org	nmckeehan@knr8.org	

Comments: _____

School Official's Signature: _____ Title: _____

I authorize the release of the above information: _____

Signature of Parent/Guardian

Date