



Stafford Middle School

15 Broad Street
Plattsburgh, New York 12901
Phone (518) 563-6800
Fax (518) 247-4942

Sarah Myers, *Principal*
Kathleen Sciole, Dean of Students

SCHOOL RECORDS REQUEST

Previous School's Name & Address: _____

Student's Name: _____

Date of Birth: _____ Grade: _____

Parent's Signature: _____

Has registered in our school as a transfer student and gave your school as the last one attended. Would you please send us a copy of the following information:

Student Transcript
New York State Test Scores
Individual IEP
Health Record
Standardized Test Information
Custody Papers (if applicable)
Disciplinary Records and Behavior Plan

Any additional information that you may have to make the transfer easier for the student and for the school would be appreciated.

Sincerely,
Tiffany Beshon
Guidance Secretary
tbeshon@plattscsd.org