Falls City Sacred Heart Catholic School
1820 Fulton Street
Falls City, NE 68355
Phone: 402-245-4151
Fax: 402-245-5217

FALLS CITY SACRED HEART CATHOLIC SCHOOL
REQUEST FOR EXCHANGE OF STUDENT INFORMATION
(SCHOOL REQUEST)

_____ _____
STUDENT'S NAME BIRTHDATE

Is now enrolled/considering enrollment at Falls City Sacred Heart Catholic School, Falls City, NE 68355. Please forward all available school records as requested.

Standardized Test
Transcript Grades
Health and Immunization Records
Psychological Data
Attendance Records
Behavioral Records
Special Education Records (documentation of students' placement with parental permission)

Thank you for your cooperation.

_____ _____
FALLS CITY SACRED HEART CATHOLIC SCHOOL DATE

I do hereby authorize the release of confidential data and records.

_____

PARENT'S SIGNATURE OR LEGAL GUARDIAN

Records can be sent via email to: molly-kirkendall@cdolinc.net or faxed to 402-245-5217.