

Phone: (715) 830-2278 **Fax: (715) 838-9573**

Regis Catholic Schools

2728 Mall Drive, Suite 200 Eau Claire, WI 54701

Phone: (715) 830-2273 • Fax: (715) 835-4658

STUDENT RECORDS RELEASE FORM

Student Name:	Date of Birth:
Current School:	
School Location (City, State):	Fax:
Release Statement: I hereby give permission to a rerelease any requested academic (grades and test scoofficials at Regis Catholic Schools.	
Parent/Legal Guardian Name:	
Parent/Legal Guardian Signature:	Date:
Please forward the following records to the sch Transcript of Academic Records (unofficial is acceptionally acceptionally acceptionally acceptionally acceptable) Health/Immunization Records Attendance Records Test Data/Standardized Test Scores (ELL if applicationally applicationally) IEP, BIP, and/or 504 (if applicable)	ptable)
☐ St. James Elementary School Attn: Jackie Lutz, Principal 2502 Eleventh Street Eau Claire, WI 54703 Phone: (715) 830-2277 Fax: (715) 858-3478	☐ Regis Middle School Attn: Paul Pedersen, Principal 2100 Fenwick Avenue Eau Claire, WI 54701 Phone: (715) 830-2272 Fax: (715) 830-5461
☐ Immaculate Conception Elementary School Attn: Kayla Bahnub, Principal 1703 Sherwin Avenue Eau Claire, WI 54701 Phone: (715) 830-2276 Fax: (715) 830-9846	☐ Regis High School Attn: Paul Pedersen, Principal 2100 Fenwick Avenue Eau Claire, WI 54701 Phone: (715) 830-2271 Fax: (715) 830-5461
☐ St. Mary's Elementary School Attn: Carisa Smiskey, Principal 1828 Lynn Avenue Altoona, WI 54720	

Supports, Modifications, a	nd Accommodations	for Student (if appl	icable):
IEP □			
504 Accommodation I	Plan □		
General Classroom Ac	commodation Plan]	
If yes, what accommod	dations are provided to	o the student (pleas	e be specific):
Extenuating Circumstance	s:		
Expulsion/Suspension	/Disciplinary Probation	on Yes \square	No 🗆
If yes, please explain:			
Recommendation: Please roof the applicant that could Recommend Recommend Recommend Recommend Recommend Recommend Recommend without r	assist us in our admis	sions review proces	rademic and personal qualities ss.
Do not recommend]		
	RATIVE USE ONL	•	REQUIRED):
Admission Decision:	Granted □	Denied \square	
Principal Name:			
Principal Signature:			Date: