



HUDSON CITY SCHOOL  
2400 HUDSON-AURORA RD  
HUDSON, OHIO 44236

REQUEST FOR STUDENT RECORDS

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_

Name and address of last school attended:

\_\_\_\_\_

(Name of School)

\_\_\_\_\_

(Street Address)

City/ State/Zip)

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

Date Withdrawn from above school: \_\_\_\_\_

I hereby request all records pertaining to my child including, but not limited to:  
EDUCATION RECORDS (Transcripts, Report Cards, Test Scores)  
ATTENDANCE RECORDS  
HEALTH RECORDS/ IMMUNIZATIONS  
DISCIPLINE RECORDS  
SPECIAL EDUCATION RECORDS (IEP, MFE, 504 Plan, Psychological Reports and related Special Education Reports)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Signature of Parent/Guardian) (Relationship) (Date)

Evamere Elementary  
76 N Hayden Pkwy  
Hudson, OH 44236  
330-653-1226

Ellsworth Hill  
7750 Stow Rd  
Hudson, OH 44236  
330-653-1236

McDowell Elementary  
280 N Hayden Pkwy  
Hudson, OH 44236  
330-653-1246

East Woods School  
120 N Hayden Pkwy  
Hudson, OH 44236  
330-653-1256

Hudson Middle School  
77 N Oviatt St  
Hudson, OH 44236  
330-653-1316

Hudson High School  
2500 Hudson-Aurora Rd  
Hudson, OH 44236  
330-653-1416

OFFICE USE ONLY      Records Requested \_\_\_\_\_      Records Received \_\_\_\_\_