



# Gervais School District #1

290 First ST - PO BOX 100  
Gervais, OR 97026-0100  
Phone: 503-792-3801 Fax: 503-792-3809  
www.gervais.k12.or.us

A culture of Diversity, Technology and Academic Excellence

*We, with the involvement of our culturally rich community, will provide a creative, enriching and safe environment, which instills a desire to become a life-long learner and a responsible citizen.*

SEND TO:

**Brooks/Eldriedge Elementary**

PO BOX 9216 Brooks, OR 97305  
503-792-3803 x2521 - Fax: 503-393-0316

SEND TO:

**Gervais High School**

PO BOX 195 Gervais, OR 97026  
503-792-3803 x2421 - Fax: 503-792-3770

SEND TO:

**Gervais Middle School**

PO BOX 176 Gervais, OR 97026  
503-792-3803 x2321 - FAX: 503-792-3626

SEND TO:

**Douglas Avenue Alternative School**

PO BOX 195 Gervais, OR 97026  
503-792-3803 x2467 - FAX: 503-792-3770

School Name: \_\_\_\_\_

School Address & Phone: \_\_\_\_\_

Student's Name: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Grade: \_\_\_\_\_

The above named student(s) has enrolled in our school. Please send us the records listed below, to the extent that they exist:

- Permanent record (cumulative to the present)
- Birth Certificate
- Certificate of Immunization Status/ Health Record Folder
- The last two Statements of Eligibility for special education
- The last three IEP'S
- Behavioral records relating to a suspension, expulsion or eligibility for special education
- Other special program records (TAG, Title 1, Testing, etc.)
- A list of the types and location of education records maintained for students in your school and the title of the person responsible for those records.

Thank you for your prompt response.

\_\_\_\_\_  
Parent's Signature & Date

\_\_\_\_\_  
Registrar's Signature & Date