



CUSTER COUNTY DISTRICT HIGH SCHOOL

20 South Center, Miles City, MT 59301
(406) 234-4920
Attendance Office: (406) 234-4930
Fax: (406) 234-4923

Rick Powell, Principal
Jamie Ogolin, Assistant Principal
Ted Schreiber, Activities Director

REQUEST FOR RELEASE OF STUDENT RECORDS

TO: Principal or Registrar

School: _____

Address: _____

Fax No: _____ Phone No: _____

PLEASE SEND REQUESTED INFORMATION/RECORDS TO:

Student Records Office
Custer County District High School
20 South Center
Miles City, MT 59301

STUDENT _____ BIRTHDATE _____

STUDENT'S GRADE OR GRADUATION YEAR _____

PARENT/GUARDIAN NAME _____

PLEASE MAIL THE FOLLOWING RECORDS:

____ Transcript ____ Immunization/Health Records
____ Cumulative File ____ Special Education Information
____ Withdrawal Grades ____ Other _____

➔ **PLEASE FAX THE FOLLOWING AS SOON AS POSSIBLE:**

Copy of Transcript Immunizations

AUTHORIZING SIGNATURE _____

Title _____

Date _____