



Request for Student Records

Must be Completed if Transferring to North Hills School District

Student Last Name	First Name	Middle Initial	Date of Birth
Name of Previous School	Address	City, State, Zip	
Phone Number of Previous School	Fax Number of Previous School		

The above named student has been enrolled in grade ____ at North Hills School District.

Please release the following information listed below regarding the student who is withdrawing from your building:

- ✓ Administrative Records (name, address, grade, birth certificate, etc.)
- ✓ Certified Academic Records
- ✓ Confidential Records including Custody papers
- ✓ Health Records and Immunization Records
- ✓ Specialized Education Services Records (IEP, GIEP, Speech and Language, etc.)
- ✓ Attendance Records
- ✓ All Certified Discipline Records – If none, please confirm

If applicable:

- ✓ PSSA Scores and Date(s) taken
- ✓ PA Secure ID Number: _____
- ✓ Date first entered Grade 9: _____

Please fax the above information to:

North Hills Senior High School
Grades 9-12
53 Rochester Rd
Pittsburgh, PA 15229
 Phone: 412-318-1434
 Fax: 412-318-1435

North Hills Middle School
Grades 7-8
55 Rochester Rd
Pittsburgh, PA 15229
 Phone: 412-318-1456
 Fax: 412-318-1453

Grades K-6

Highcliff Elementary
Grades K-6
156 Peony Avenue
Pittsburgh, PA 15229
 Phone: 412-318-1582
 Fax 412-318-1584

McIntyre Elementary
Grades K-6
200 McIntyre Road
Pittsburgh, PA 15237
 Phone: 412-318-1622
 Fax 412-318-1624

Ross Elementary
Grades K-6
90 Houston Road
Pittsburgh, PA 15237
 Phone: 412-318-1542
 Fax 412-318-1544

West View Elementary
Grades K-6
47 Chalfonte Avenue
Pittsburgh, PA 15229
 Phone: 412-318-1503
 Fax 412-318-1504

Parent's Signature

Date