

Chinook's Edge School Division

4904 - 50 Street | Innisfail | Alberta | T4G 1W4 403-227-7070 | 800-561-9229 www.cesd73.ca | Where Students Come First!

Date:

School Name and Address

RE: Request for Student Records

This is a courtesy letter advising that (______) has registered with (______) in the Chinook's Edge School Division for the rest of this academic school or this 2024-25 school year.

Please acknowledge receipt of this letter, make pertinent PASI entries, and or forward any physical student records that have not yet been uploaded into PASI as per Student Records Regulation section 4(1) for this student to:

Digital records email to:

Paper records mail to:

Thank you for your cooperation.

Sincerely,

Name:

Title:

The following is to be completed ONLY if a record is being requested from outside Alberta.

Permission is hereby granted to release the official student record of ______to the school requesting information from above.

Parent Name/Guardian

Signature of Parent or Guardian

Date

The collection of personal information herein is collected pursuant to the provisions of the *School Act* and its Regulations. The *Freedom of Information and Protection of Privacy Act (FOIP)* and the *Vital Statistics Act*, as the collection is related directly to and is necessary to the School Boards' obligations to provide students with an education program that meets their needs and to provide a safe and secure school environment. All information collected pertaining to students will be kept confidential unless otherwise authorized in writing by the parent or guardian of the student.