

**Sage Hills Elementary
3033 Swainson Ave
Saratoga Springs, UT 84045**

Phone: 801-610-8723

Fax: 801-341-5915

Date _____

REQUEST FOR INFORMATION

Authorization is given to _____ (Former School)

_____ (Address)

_____ (City, State & Zip)

to provide **Sage Hills Elementary School** the information listed below concerning the following students:

Name

Birth date

Grade

Please send:

----- **Cumulative Records**

----- **Health Records**

----- **Test Data**

----- **Special Education Records**

----- **All of the above Forms**

Parent or School Official

Mr. Brady Rowley, Principal

Alpine School District