



499 Range Road, PO Box 1500
Marysville, MI 48040
Phone: (810) 364-8990

REQUEST FOR STUDENT DISCIPLINE RECORDS

Please complete a separate form for each school previously attended.

Student Name: _____

Grade(s) Completed: _____

Name of School: _____

School Address: _____

School City/State/Zip: _____

Telephone: _____

The above-named student has applied to attend a St. Clair County RESA member school district under the Schools of Choice program. Please email the student's discipline records for the 2024-25 and 2025-26 school years. If there are no disciplinary records on file, please note that on the bottom of this form. Please email all discipline information to soc@sccresa.org.

At this point in the process, **ONLY discipline information is needed**. If a student is preliminarily accepted into the School of Choice, additional records will be requested separately. Thank you in advance for your assistance.

PARENTAL PERMISSION

I hereby authorize the release of all disciplinary records for the student named above to St. Clair County RESA and the district in which the student would be enrolled. I understand that St. Clair County RESA will be required to share any information obtained with my School of Choice Application. I authorize St. Clair County RESA and/or the choice district to review these records to determine my students' eligibility for enrollment for the upcoming year.

Signature of Parent/Guardian

Date

.....
(School officials to complete the below portion)

_____ has no discipline infractions for the 2024-25 and 2025-26 school years.
(Student Name)

Name / Title

Date