



EDMONTON
CATHOLIC SCHOOLS

Student Records & Information – Request and Authorization

Edmonton Catholic Schools, 9405 50 Street NW, Edmonton AB T6B 2T4

Phone 780-441-6000 Fax 780-423-3031

Student information (Please print):

Student name _____ AKA name _____

Date of birth (YYYY/MM/DD) _____ Alberta Education ID (If known) _____

Current mailing address _____
Street address _____

City _____ Province _____ Postal code _____

Phone number _____ Alternate phone _____ Fax _____

Schools attended: Please list the names of schools and dates attended while a student with Edmonton Catholic Schools.

Grade	School name	Year	Grade	School name	Year
Pre K			7		
K			8		
1			9		
2					
3			10		
4			11		
5			12		
6					

Information requested (Please read instructions on the back of this page)

Student Records

- ☐ Report cards
☐ Educational/Psychological Assessments
☐ Grade 9 Transcript
☐ Complete file
☐ Other (Please specify) _____

Letters of Proof / Confirmation

- ☐ Confirmation of Enrolment/Attendance
☐ Proof of Language of Instruction
☐ Other (Please specify) _____

If you wish to provide more information, please attach additional pages.

When your records are ready do you want us to: ☐ call you for pick up ☐ mail it out

Date _____ Name of Requestor (please print) _____

Relationship to student _____

Signature _____

OPTIONAL - Release Information (If required): If the requested records are to be released to another individual, agent, organization, or institution, please complete the following:

Please provide the requested records to

Name _____ Organization _____

Mailing address _____

Street address _____

City _____ Province _____ Postal code _____

Phone number _____ Alternate phone _____ Fax _____

I, _____ allow Edmonton Catholic Schools to release the requested records to the above requestor.

Date _____ Signature of student/parent/guardian _____

POPA Notification Statement

This personal information is collected in accordance with section 4(c) of the *Protection of Privacy Act* (POPA) and will be protected in accordance with section 10 of the Act. Collected information is used and disclosed in accordance with sections 12 and 13 of POPA. This information will be used to process and issue student records. If you have any questions about the collection and use of your information, contact Student Records, Edmonton Catholic Schools at 780-441-6000.



INSTRUCTIONS

- This form is used to request specific information from a student's record such as report cards, Individual Program Plans, assessments, etc. This form can also be used to request letters of proof or confirmation, including confirmation of attendance, proof of language of instruction, or confirmation of registration or enrolment needed for tax purposes, citizenship applications, etc.
- If the request is being submitted on the behalf of a student over the age of 18, the OPTIONAL-Release Information box **must** be completed and signed.
- While the processing time of each request will vary, all requests made during the regular school year should be completed within 30 days of receiving the completed form.
 - o During extended school breaks (i.e. Christmas, Spring Break, or Summer), processing time may be longer.
- Please note that the requested records and/or information cannot be provided to you by e-mail.
- If you wish to provide more information regarding your request, please feel free to include additional pages.

Please send the completed form and any additional pages to:

(by mail or dropping off in person)

Division Monitoring – Student Records

Catholic Education Services

9405 50 Street NW

Edmonton, AB T6B 2T4

(by fax)

780-423-3031

(by e-mail, only if form is scanned)

student.records@ecsd.net

For more information, please contact Edmonton Catholic Schools – Student Records at 780-441-6000 or e-mail student.records@ecsd.net.