



Cold Spring Harbor CSD

Request for School Records

Students Entering Grades 1-6

To: **Guidance Department/Main Office** (of the most recent school this student is attending or has attended)

School: _____

Street: _____

Town, State, Zip _____

Dear Sir or Madam,

I have registered my son/daughter _____ in grade _____ to begin school on _____ at Cold Spring Harbor CSD.

Please forward the following information to Cold Spring Harbor at the address circled below as soon as possible:

- All standardized test results
- Scholastic records including: completed courses with FINAL grades
- Report card to date for the current academic year
- School profile with explanation of the grading system (If Applicable)
- Explanations of abbreviations of course titles

Thank you very much for your kind assistance.

Please mail the requested information to (Circle the appropriate school)*:

*at registration you will be informed of the school your child will be attending

Goosehill Primary School Grade 1 Only 75 Goosehill Road Cold Spring Harbor, NY 11724 P 631-367-5940 F 631-367-2157	Lloyd Harbor School Grades 2-6 7 School Lane Huntington, NY 11743 P 631-367-8800 F 631-421-4229	West Side School Grade 2-6 1597 Laurel Hollow Road Syosset, NY 11791 P 516-692-7900 F 516-692-4845
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Parent's Signature