



## GALENA INTERIOR LEARNING ACADEMY

[www.galenaalaska.org](http://www.galenaalaska.org)

P.O. Box 359, Galena, AK 99741

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[records@galenanet.com](mailto:records@galenanet.com)

### Student Records Request for Enrollment Determination (FOR REVIEW PURPOSES ONLY)

Name of student: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of school currently attending:

Fax: (907)

Phone: (907)

Email:

Please forward the following information:

- Current Grade/Attendance Report
- Transcript
- 2 years previous SBA Scores
- HSGQE & WorkKey Results (if applicable)
- LEP-Limited English Proficiency (if applicable)
- Current IEP & ESER, or ILP (if applicable)

**Per parent signature below, please email records if at all possible. Thank you for your cooperation.**

Signed: \_\_\_\_\_

Parent/Legal Guardian Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent/Legal Guardian Printed Name