



REQUEST FOR STUDENT TRANSCRIPT

Dear Prospective Parents:

Part of our evaluation process includes the student's current Teacher Recommendation Form, Transcripts and/or the permanent student file. We cannot request records from your child's current school; only a parent has the authority to release this information. **Please sign this release form and take it to your child's current school** so that copies of their complete file and school transcripts may be forwarded to St. Thomas School.

REQUEST FOR RELEASE OF STUDENT INFORMATION

To the registrar of _____
(Name of current school)

My child, _____, has applied to St. Thomas School for the _____ school year. I hereby authorize the release of written and/or verbal information to include current test scores, report cards, reports, transcripts, recommendations, and other materials pertinent to my child's application file to:

ST. THOMAS SCHOOL
8300 N.E 12th St.
MEDINA, WA 98039
(425) 454-5880
(425) 454-1921 FAX
lynfelice.calvin@stthomasschool.org

Your prompt attention to this matter is very much appreciated. Thank you for your time and attention.

Signature of parent _____ Date _____

Information received by St. Thomas School will become part of the student's permanent file, and will be available for inspection and review in accordance with the Family Education Rights and Privacy Act of 1974. All teacher recommendations are considered confidential and will not become a part of the student's records should he/she be enrolled.