

Request for Release of School Records

To the parent(s)/guardian(s): Please complete, sign and submit this form directly to your child's current school.

I/We, the parent or guardian of _____, hereby authorize
_____ to release
(Name of current school)

records for _____.
(Name of student)

Date of birth: _____ Dates attended this school: _____ to _____

Parent or Guardian Signature: _____ Date: _____

Please initial Yes or No to the following statement:

I give permission for the faculty or staff of Potomac Crescent Waldorf School to contact my child's current or former school for further information to assist in determining if Potomac Crescent Waldorf School is the right educational setting for my child.

_____ Yes _____ No

To the school: Please send to Potomac Crescent Waldorf School:

1. Official transcript of current school year grades, including teacher comments
2. Official transcripts for previous school years
3. All standardized testing results, if any
4. All psychological-educational testing results and/or individual education plan (if applicable)
5. Developmental assessment reports such as first grade readiness reports (if applicable)

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Potomac Crescent Waldorf School
Attn: Admissions
2 . Washin ton St.
Alexandria, VA 223

You may also return documents via email to admissions@potomacwaldorf.org.