

For the Parent/Guardian:

Please complete, sign and return to St. Mary's Episcopal School.

I authorize St. Mary's Episcopal School to contact my daughter's current and/or previous schools for the release of school and health records and recommendations necessary for her application to St. Mary's Episcopal School.

Name of student _____ Date of birth _____

School currently attending _____ Current grade/class _____ Dates attended _____

School's address _____

City, state and zip _____

School's phone _____ School's fax _____

Principal or Director's name _____

I understand that the student evaluation forms, completed by school personnel, are confidential and not accessible to me. I hereby certify that I am the parent/guardian of the above-named child.

Parent/guardian _____
PARENT/GUARDIAN SIGNATURE DATE

Parent/guardian name _____
PLEASE PRINT

For the student's current school, preschool or daycare:

Please send copies of all records indicated below that apply to named student.

- 1 Current transcript
- 2 Transcript of all courses, grades and teacher comments for previous years
- 3 Scores for all the SSAT, ISEE, Aptitude, IQ, reading and achievement tests taken during previous years
- 4 Attendance records
- 5 Psychological reports or profiles
- 6 Health records
- 7 The accompanying recommendation form(s), completed by appropriate school personnel

Send to:

St. Mary's Episcopal School
Office of Admission
41 N. Perkins Rd.
Memphis, Tennessee 38117-2499

Thank you.