



**Greenwich Academy
Admission Office
200 North Maple Avenue
Greenwich, Connecticut 06830**

PARENT CONSENT FORM FOR THE RELEASE OF SCHOOL RECORDS

Parents: *Please complete and give this form to the Head of School or Principal at your daughter's current school after November 15.* It is requested that the school your daughter attends send report cards, teacher comments and standardized testing results to Greenwich for the current academic year and for the full previous year.

Name of Applicant _____ Date of Birth _____

Name of Current School _____ Current Grade _____

Address of Current School _____
Street Address

Town State Zip

Current School Phone Number

Parent/Guardian Signature _____ Date _____

I authorize the release of academic records for the child named above including: grades, teachers' comments and standardized testing for the current academic year and for the full previous academic year. The requested information should be sent after the first term's report cards have been completed. Thank you.