

MAGEN DAVID YESHIVAH Admissions Office

2130 McDonald Avenue Brooklyn, NY 11223 718 269-4076 Fax 718-942-6562 admissions@mdyschool.org

RECORDS RELEASE FORM

PARENTS: Please submit this form to your	child's current school after you have	signed the release section below.
PRINCIPAL: Please mail or email the reco	ds for	to:
	(student name)	
Magen David Yeshivah Admissions Office 2130 McDonald Avenue Brooklyn, NY 11223 Fax: 718-942-6562 Email: admissions@mdyso	hool.org	
These records should include:		
 Report cards for the two p 	rior school years	
• Current semester report ca	nrd	
• Results of student's most	recent standardized test scores	
Attendance Record		
• IEP's and/or Resource Roo	m Records (if applicable)	
For the application to be complete, all materials	erials must be submitted as soon as p	possible so that we may begin
reviewing the file.		
I authorize my child's current school to rel	ease information to the Magen David	Yeshivah Admissions Office. I understand
that all of the materials shared with the Ac	missions Office are confidential.	
Parent/Guardian Signature		Date
For further information, please contact:	MAGEN DAVID YESHIVAH	

Telephone: 718 269-4076

Email: admissions@mdyschool.org