



Be Who You Are and Be That Well

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www.olgcschool.org

Release of Student Records for Kindergarten Applicants

Date: _____

Name and Address of Preschool

Phone#: _____

Fax #: _____

The following student has applied for admission to Kindergarten at Our Lady of Good Counsel School.

Child's Name _____

Date of Birth _____

Dear Preschool Director/Teacher:

I give permission for the Preschool to forward copies of report cards, IEP's and other evaluations to the Principal's attention at the above address. I also give permission for the Kindergarten teacher to speak with the Preschool Director/Teacher to obtain additional information about my child.

Signature of Parent/Guardian

Date