



**REQUEST FOR SCHOOL RECORDS FOR STUDENTS
ENTERING 2ND, 3RD, OR 4TH GRADES**

***PARENTS: Please sign and give this form to the school your child
attended in the 2020-21 school year.***

STUDENT NAME _____

BIRTHDATE _____

CURRENT GRADE _____

CURRENT SCHOOL _____

I give my consent to release the following information (**if available**) to
St. Paul's School.

- 1) Final Academic records
- 2) Medical records
- 3) Psychological records

Signature _____
Signature of Parent or Guardian

Date _____

Attention: Registrar of current school:

The student named above has enrolled in St. Paul's School for the
2021-2022 school year. Please send pertinent material after the final report
card has been issued, which may assist us in guidance and proper placement
of this student to:

Joni Gahm
St. Paul's Lower School
P.O. Box 8100
Brooklandville, MD 21022-8100