



REQUEST FOR STUDENT INFORMATION

Student's Name: _____

Student's Date of Birth: _____ Student's Current Grade: _____

This will authorize you to release/exchange information and share communication in verbal, written, and/or electronic form to:

Pope John XXIII Regional High School (8-12) _____

Pope John XXIII Middle School (5-7) _____

Rev. George A. Brown Memorial School (PreK-4) _____

The student listed above has expressed an interest to attend the aforementioned school. Kindly forward the following information, if applicable:

Attendance Records
Discipline Records
Grades/Report Card
Standardized Test Results
Transcripts/Credit Data for Transfers (unofficial)

The information will be used for the purpose of reviewing the application for admissions and in the planning of an appropriate educational program for the student.

If this student has an IEP or 504, please send the most up to date documentation. If the student has been referred to an Intervention & Referral Services team to assist with social, emotional, academic and behavioral challenges; please provide that documentation also. Failure to make known any relevant conditions that could affect the student's full participation in the total educational program of The Academy will be viewed as grounds to re-evaluate the student's application and to amend or rescind any offer of admission.

Pope John XXIII Regional High School
Attn: Office of Admissions
28 Andover Road
Sparta, NJ 07871
Email: admissions@popejohn.org

Pope John XXIII Middle School
Attn: Office of Admissions
28 Andover Road
Sparta, NJ 07871
Email: admissions@popejohn.org

Rev. George A. Brown Memorial School
Attn: Main Office
294 Sparta Avenue
Sparta, NJ 07871
Email: admissions@revbrownschool.org

Parent/Guardian Signature: _____ Date: _____