



Faith • Scholarship • Service

Fordham Prep Student Permission to Release Records (June 2026)

Dear Parent/Guardian,

Please submit this form to your current school in **June 2026**, so that records will arrive at Fordham Prep *before* the school year begins.

Student's Name _____

Student's Address _____

I hereby give my permission to (current school): _____ to release my son's final **2025-2026** academic and health records to Fordham Prep.

Current school, please remit copies of these records ****after year-end grades have been processed.**** to the address (or email) listed below:

Fordham Preparatory School
ATTN: Admissions Office
441 East Fordham Road Bronx, NY 10458-5175
admissions@fordhamprep.org

Parent/Guardian Signature _____