

Rosary High School

A College Preparatory Institution

www.rosaryhs.com

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Release of Records for Incoming Freshmen

Student's Name: _____

Current School: _____

School Address: _____

School Phone: _____

I give my permission for the administration at _____ *Name of Current School* to release the school records of _____ *Name of Student* to the administration at Rosary High School for the purpose of admission and placement. I understand that this information is for the exclusive use of Rosary High School and will be kept confidential according to the stipulations of the Family Educational and Privacy Act of 1976.

Signature of Parent/Guardian

Date

I authorize Rosary High School to send my child's Placement Exam results to my child's current school. I understand that my child's scores will only be used for curriculum planning purposes at her current school.

Signature of Parent/Guardian

Date