



## Release for School Records

Parents must complete and return this form to Saints Peter and Paul School.

*Please print:*

Name of Student \_\_\_\_\_

### Current School Information

School Name \_\_\_\_\_

School Address \_\_\_\_\_  
\_\_\_\_\_

School Phone and Fax \_\_\_\_\_

I request that the school record of \_\_\_\_\_  
Student Name

**Be forwarded to:** Saints Peter and Paul School  
1327 Boot Road  
West Chester, PA 19380

Please include the following information

1. Transcript and academic records.
2. Attendance record.
3. Results of standardized achievement and/or aptitude tests.

\_\_\_\_\_  
*Signature of parent or guardian*

\_\_\_\_\_  
*Date*