

Please forward this release form to your child's current school

Records Release Form

Date:				
Student name	e:			
То:				
	(Name of Current School)			
	(Current School's Street Address)			
	(Town)	(State)	(Zip Code)	
important par Please forwar grades, standa Please do no	amed student is applying for admission to of the application procedure included a copy of the student's entire acade ardized test scores, and other pertinent in the test of the student's entire acade are the scores at this time. On the particular test of the student's entire the score and enrollment. Send a copy on the student's entire the student's entire the score and enrollment.	es a review of the emic record inclu- nformation. Official records was	e student's current ading current grad	t school record. des, cumulative
	Formation which you feel may be help ords) are requested as well. We apprecia			
My signature Xavier Prepai	gives consent for release of a copy of ratory School.	my child's school	record to be sent to	o Saint Francis
-	(parent/guard	ian signature)		_
	St. Francis Xavier		ol	
	33 Cros	s Street		

TEL. 508.771.7200 FAX. 508.771.7233 WEB www.sfxp.org

Hyannis, MA 02601