



## Records Release Form

**To the Parent:** Please complete and sign the top portion of this form and give to your child's current school office.

I hereby give my permission for the release of the following academic records for the past two years including current fall grades and standardized testing scores of

\_\_\_\_\_ to be released from  
Name of Child

\_\_\_\_\_ and mailed to  
Name of School

**Office of Elementary Admissions  
Convent & Stuart Hall  
2222 Broadway  
San Francisco, CA 94115**

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
Parent or Guardian

**To Applicant's Current School:** Please send this student's academic records for the past two years (if applicable). This should include all grades and any standardized testing for the past two years, and first semester grades for the current year as soon as they are available. The records will be used only in the admission process, and all information will be treated confidentially. **Please return this form with the requested academic records.**

Thank you for your prompt reply. Should you have any questions, please contact the Admissions Office at 415-563-2900.