



## Records Release Request

**TO THE PARENT/GUARDIAN:** Please complete, sign, and return to your child's **current school**. Thank you.

**TO THE CURRENT SCHOOL:**

Our child has applied to Cannon School for Grade \_\_\_\_\_ for the \_\_\_\_\_ - \_\_\_\_\_ school year.

Please release a copy of the records including two years of report cards if applicable, discipline, standardized testing and any other relevant information pertaining to the student.

Student's Name: \_\_\_\_\_  
First Middle Initial Last

Home Address: \_\_\_\_\_

Current School Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Current School Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**I do hereby grant above noted school permission to release the information requested to Cannon School.**

Signed by Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_