



**AUTHORIZATION FOR TRANSFER/RELEASE
OF STUDENT EDUCATION RECORDS**

Parents: Please complete and sign this form, then submit it to your child's counselor or head of school.

The following student(s) has (have) applied for admission to St. Benedict Preparatory High School:

Full Name	Date of Birth	Grade
1. _____	_____	_____
2. _____	_____	_____

To the Student's Current School:

Please send a copy of each student's records, including the following information, to St. Benedict Preparatory High School upon receipt of these documents:

- Most Recent Report Card;
- **Incoming Freshmen-** Report Cards from 7th & 8th grade
- **Transfer Students-** Report Cards from all previous high school years
- All standardized test results
- All Health Records
- All psycho-educational test evaluations
- Special Education records/I.E.P. documents

I, the parent or legal guardian of the child(ren) listed above, hereby give my permission that the school, health, psychological and special education records along with any other pertinent school information be released to St. Benedict Preparatory High School.

Parent/Guardian Signature

Date

Please send records to the address below:

St. Benedict Preparatory School
Attn: Admissions Office
3900 N. Leavitt St.
Chicago, IL, 60618