

PRELIMINARY REQUEST FOR EDUCATIONAL INFORMATION AND RECORDS

This section is to be completed by the PARENT or GUARDIAN			
Applicant's Name			
	First	Middle	Last
Applying to Grade	for the academ	nic year beginning/ Month Year	
l authorize t	the release of COP	IES of my child's school reco	ords to La Salle Academy.
Parent/Guardian Signa	iture		Date//
Current School	<u> </u>	Phone	Fax
School Address			

This section to be completed by personnel of the current school

The above student has applied for admission to La Salle Academy. Please forward <u>COPIES</u> of the following to the attention of *Stephen Mickulik, Principal*

440 Holland Street, Shillington PA 19607 / FAX: 610-777-1280 / mickulik@lsabear.com

- The most recent report card & final marking period report cards from the last two years
- Attendance records & Behavior reports
- Standardized test results from the last two years
- Any other information such as psychoeducational evaluation results, IEP's, 504 plans that would help us in understanding the student's educational needs

Please do **NOT** forward any health records at this time.

If the student is accepted and enrolled, we will request all official records at a later date.

Signature	_Position held
Name (please print)	Date/
School Telephone () Email	
Full School Address	