



REQUEST FOR STUDENT RECORDS

To: _____
Name of School

Address: _____

We have recently received application(s) for the admission of the following student(s) to Sycamore School.

Name: _____ Grade: _____ Applying for school year: _____
(ie. 12-13)

Name: _____ Grade: _____ Applying for school year: _____

Name: _____ Grade: _____ Applying for school year: _____

Please forward copies of all relevant school records that will help us in our consideration of the student(s) listed above, including:

- **Recent report cards**
- **Standardized achievement test scores**
- **Intelligence and aptitude test scores**
- **Teacher and/or counselor observations**
- **Student health record**

Please forward records to:

Director of Admissions, Sycamore School
1750 West 64th Street, Indianapolis, IN 46260

Thank you for your assistance in this matter.
Susan Karpicke, Ed.D., Director of Admissions

—
As the parent/guardian of the above named student(s), I give permission to release my child's records to Sycamore School.

Signature of Parent/Guardian

Date

Please return this form and the appropriate documents to:

Director of Admissions, Sycamore School, 1750 West 64th Street, Indianapolis, IN 46260.

RSR 1 of 1