



**RECORDS RELEASE FORM**

PARENTS/GUARDIANS NEED TO COMPLETE THIS FORM AND TAKE IT TO THE STUDENT’S CURRENT/PREVIOUS SCHOOL REGISTRAR.

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current/Previous Grade: \_\_\_\_\_

Current/Previous School: \_\_\_\_\_

This student requires the following records to enroll with Purcell Marian High School. Please forward this information to 513-751-1395(fax) or dellington@purcellmarian.org

<b>Incoming Freshmen:</b>	<b>High School Upperclassmen Transfer:</b>
6,7,8 grade report cards	Official Transcript from Current School
Standardized Test Scores	Standardized Test Scores
Discipline & Attendance Reports	Discipline & Attendance Reports
IEP/ETR/ISP *if applicable for CS3/Special Ed	IEP/ETR/ISP *if applicable for SSST/Special Ed
Other written accommodations	Other written accommodations
Other teacher/administrative notes	Other teacher/administrative notes
Birth Certificate	Birth Certificate
Medical Records (including immunizations)	Medical Records (including immunizations)

I hereby authorize the release of school records for the above-named student.

Parent/Guardian/School Admin \_\_\_\_\_

Questions? 513-751-1230 x105 Mark Majick - Education Specialist  
513-751-1230 x128 Dawn Ellington - Admissions Coordinator