

*Saint Leo the Great Catholic School*  
*A National Blue Ribbon School*  
*3704 Old Lee Highway*  
*Fairfax, Virginia 22030*  
*703-273-1211, (fax) 703-273-6913*

<b>Release of Student Records</b>
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Date: \_\_\_/\_\_\_/\_\_\_

Name and Address of Previous School:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

The following student has applied for admission to **Saint Leo the Great Catholic School**

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Child's Name	Date of Birth	Grade
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Please forward the following information to my attention at the above address as soon as possible so that appropriate educational placement may be made (\*where applicable).

Academic Transcripts

\*Current & Previous Standardized Test Scores

\*Previous & Current Year Report Cards to Date

Attendance Information

Physical Examination

Health and Immunization Records

Physical Fitness Test Records

Psychological/Educational Evaluations

Sociological Information

IEP/504 Plan

Child Study Referrals

Speech and Language Evaluations

Vision Screening Reports

Special School/Center Information

Discipline Record

Screening and Eligibility Minutes

Custody Information/Court Decisions

Thank you for your cooperation. At the conclusion of current school year, please forward final report cards.

Sincerely,

David J. DiPippa

Principal

I give permission to have the above records forwarded to the principal's attention at the above address.

\_\_\_\_\_

Signature of Parent/Guardian

Date