



Release of School Information Form

Please complete and give this signed Release of School Information Form to the administrator or registrar at your child's current school.

Official School Records are transmitted directly school to school and may not be delivered by parents.

TO ADMINISTRATOR OR REGISTRAR:

STUDENT'S FULL NAME: _____

DOB: _____ CURRENT GRADE: _____ GRADE APPLYLING FOR: _____

The student named above has applied for admission to Waimea Country School. In order for the admissions application to be complete, the following materials are requested:

- 1) Student transcripts, including the current and previous two years grades**
- 2) Standardized testing results and any evaluations**
- 3) Health records, including immunization report**
- 4) All specialized program reports and/or records**

I authorize the release of school records and information of the above-named student to Waimea Country School. This release is valid for a period of one year from the date of my signature.

Name of Parent/Guardian

Date

Signature of Parent/Guardian

Date

Thank you in advance for your time and assistance.

Please send school records/transcripts to:

**Admissions Committee
Waimea Country School
PO Box 399
Kamuela HI 96743**

Fax to: **808-885-9252**

Scan & Email to: office@waimeacountryschool.org

Phone: **808-885-0067**