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 APPLYING 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.
Waimea Country School
(808) 885-0067

Please send copies of transcripts and health records to:

WCS Admissions Committee

Scan & Email to:  office@waimeacountryschool.org
Mail to:  Waimea Country School
          PO Box 399
          Kamuela, HI  96743

WCS Release of School Information