

RECORDS RELEASE

To: Parents/Guardians

I give permission for the Gordon School to request records and inquire formally and informally about my child at his/her present school. I understand that these records and references will be kept confidential and are not available to the applicant or family. Please note the importance of filling out the information below accurately. Please deliver this form and the teacher recommendation form to the applicant's current school or program and be certain to time its delivery so that the information requested arrives to Gordon by February 15. If applicable, the school should fill out the recommendation form and return, along with the transcript and records, to the Gordon School Admission Office.

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Current School	
	Contact's Email
Student's Current Grade	
Signature of Parent/Guardian	Date
To: School Registrar or School Administrator	
	So that we may be fully informed of the student's qualifications, please s original form, by February 15. If you have received this form after the
Copy of most recent school report or progress reports from the current academic year.	

Do not send permanent file at this time. If the student enrolls at Gordon, please forward the entire school file and health records.

Completed teacher recommendation form (this may come directly from the current teacher to Gordon).

We are aware of the time and thought this request requires, and we sincerely appreciate your assistance. We invite you to contact our office directly with any concerns or questions you may have about this request. This information will be treated confidentially.

Please mail or scan and email this form with materials directly to Gordon School Admission Office, 45 Maxfield Avenue, East Providence, Rhode Island 02914 or to admission@gordonschool.org. Please retain a copy for your records.

☐ Copy of any standardized test results.

☐ Copy of the **previous full academic year's** school report or progress reports.

 \square Copy of any educational assessments or specialized testing results.