

PLEASE GIVE THIS FORM TO THE OFFICE OF YOUR CHILD'S PRESENT SCHOOL



Office of Admissions  
Request for Records

Student's Name \_\_\_\_\_

School \_\_\_\_\_

Date Student Enrolled \_\_\_\_\_

**To the Registrar:** This student is applying to Kimberton Waldorf School. Please send us the following records (if applicable):

- Academic Records (Listing Subjects and Grades) for the Past Three Years
- Standardized Testing Results
- Screening/Placement Records for Academically Talented Programs and Special Education Programs
- Psychological Testing and Evaluation
- Individual Educational Plans, Service Agreements, or Accommodations
- Records of Disciplinary Actions
- Attendance Records
- Other Pertinent Documents
- Health and Dental Records (*required only at time of enrollment*)

**Please send records to:**

Admissions Office, Kimberton Waldorf School  
PO Box 350  
Kimberton, PA 19442

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**Guardian's permission below:**

I hereby give my permission to \_\_\_\_\_  
(present school) to release the records of \_\_\_\_\_  
(child's name) to Kimberton Waldorf School.

**Signature of Parent/Guardian** \_\_\_\_\_