



WOODLANDHILL
MONTESSORI SCHOOL

An Education for Life

Release of School Records

100 Montessori Place ❖ North Greenbush, New York 12144

Telephone 518.283.5400 ❖ Fax 518.283.4861

WWW.WOODLANDHILL.ORG

NOTE TO PARENT/GUARDIAN: Please complete, sign and date this form. Forward one copy to the student's present school and one copy to Woodland Hill. Please have the school send the requested records to the Woodland Hill Montessori School as soon as possible. Your student's complete school records are needed before the Woodland Hill Montessori School can make an admissions decision.

TO The School Office of _____
(student's present school)

School Address _____

School Phone _____

School Fax _____

Contact Person _____

FROM Parent/Guardian of _____

I hereby authorize the release of any and all records of this student to the Woodland Hill Montessori School.

Name of Parent/Guardian _____
(please print)

Signature _____

Date _____

Address _____

Phone _____

NOTE TO SCHOOL ADMINISTRATOR:

The transfer of the student's records to Woodland Hill Montessori School should include copies of the following: *(please check all records you have included or note not applicable)*

- _____ 1. Transcripts of all evaluations and grades.
- _____ 2. Results of all standardized testing.
- _____ 3. All health records including any assessments done by other health professionals.
- _____ 4. All attendance records.
- _____ 5. Individual Education Plan (IEP), if applicable.
- _____ 6. Any other information maintained in the student's permanent record.

Please send all school records for the above named student to:

Director of Admissions
Woodland Hill Montessori School
100 Montessori Place
North Greenbush, NY 12144