



THE STEWARD SCHOOL

GRADES 1-12 RECORDS RELEASE REQUEST

Please complete and forward this request form to the student's current school.

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Student Name _____

Date of Birth _____ Grade _____

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I hereby authorize _____ to release all
name of current school

school records, including records in the confidential and discipline files, pertaining to the above named student. Please include copies of the official transcripts, evaluations, test data, and health information.

This release gives permission for the above mentioned school to share verbal and written information relevant to the admissions process with The Steward School. Information should be sent to:

Admissions Office

The Steward School
11600 Gayton Road
Richmond, VA 23238

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Parent/Guardian signature Date