



Transcript Release and Confidentiality Form

To the applicant's parents: Please type or print the name of your child, sign and date this form, and give it to your child's current school office with a stamped envelope addressed to The Island School, Admissions, 8553 NE Day Road, Bainbridge Island, WA 98110.

Applicant's name _____ Current grade _____

To (name of current school) _____

To the Parent/Guardian: Please read and sign the following statement:

For the student named above, I authorize the release of school records, including an official copy of all grades/grade reports issued during the time the student has been enrolled in your school, as well as the results of any academic or other testing. I also grant permission to speak with counselors, teachers and administrators. I acknowledge that I waive my right to read the confidential teacher evaluation.

Signature of Applicant's Parent or Guardian _____ Date _____

To the Applicant's current school: Please forward this student's official school records for the time enrolled in your school. This should include all grade reports to date, attendance records, scores for aptitude/achievement tests, as well as any grade reports issued during this current school year. Please include a copy of this form with the information that is sent.

Thank you for your prompt attention to this, and please contact The Island School with any questions.