

# *The Catholic High School of Baltimore*

## RECORD RELEASE FORM

Parents/Guardians, please complete the form below and submit it to the applicant's current school, either to her guidance counselor or to her principal.

DATE: \_\_\_\_\_

TO: Principal/Guidance Counselor

FROM: Parents/Guardians of \_\_\_\_\_  
Student's Full Name Present Grade

RE: Authorization for release of our daughter's current transcripts as well as:  
Sixth, Seventh, and Eighth Grade Transcripts  
Standardized Test Scores  
Evaluation of Applicant's Qualifications  
ARD and/or IEP Information  
Student's Current Grades

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This authorizes you, \_\_\_\_\_, to release the above information to:

The Catholic High School of Baltimore  
Office of Admissions  
2800 Edison Highway  
Baltimore, Maryland 21213  
Phone: 410.732.6200 ext. 213 Fax: 410.732.7639

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Signature of Parent/Guardian Date

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Home Phone Parent/Guardian E-mail Address