

## THE HAGUE SCHOOL

is an applicant to The Hague School.

## Student Record Release Form

## TO THE APPLICANT'S PARENT OR GUARDIAN:

Please complete the top section of this form and give to the appropriate official at your child's current school so that The Hague School's admissions office may obtain the prospective student's records

Name of Applicant				
I authorize Name of School	1	to release information specified	l below to The Hague Schoo	
Signature of Parent or Guardian		Phone	Date	
Applicant's Current Grade		_Applicant's Date of Birth		
TO THE SCHOOL OFFICIAL:				
Please release the following information formation is required for admission			ddress below. As this	
<ul><li>Standardized Test Results</li><li>Attendance Records</li><li>Any Psychological Testing ar</li></ul>	nd/or Records-Immunization 1	n all previous years and the cur Records Occupational Therapy, IEP or 50	·	
Has the applicant ever been suspende	ed, placed on probation, or ha	nd any significant behavior infr	action?	
If yes, please explain:				
Signature		Date		
Printed Name		Title		
Email Address	Phone	Fax		
School Name				
School Address				
Street	City	State	Zip	

The Hague School encourages students of any race, gender, religion, color, and/or national or ethnic origin to apply to any and all of its programs and activities and does not discriminate on the basis of any protected class under state and federal law

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