

Rosary High School

A College Preparatory Institution

www.rosaryhs.com



901 N. Edgelawn Dr., Aurora, IL 60506

Ph: (630)896-0831

Fax: (630)896-8372

Parental Authorization for Release and Exchange of Information

(to be used for students transferring TO Rosary High School)

To be completed by parent or legal guardian:

I hereby authorize:

Name of School

Address of School, City, State, Zip Code

School Phone and Fax Numbers

to release the following records of my child, _____ in grade _____.

- Academic Records
- Psychological Referrals & Evaluations
- Standardized Tests
- Health Records
- Other: _____

By signing below, you are granting permission for Rosary High School to have open communication with the institution listed above.

Signature: _____

Parent/Guardian

Date: _____

To be completed by current school administration and sent directly to Rosary High School.

- I hereby attest that the above-mentioned student is in good standing.
- The above-mentioned student is not in good standing or is currently on disciplinary probation.

Signature: _____

Date: _____

Title: _____

Please return this completed form to:

Rosary High School
Attn: Karen Ramella
901 N. Edgelawn Drive
Aurora, IL 60506

Phone: 630-896-0831

Fax: 630-896-8372