

Request for School Records

Dear Parents,

Please sign this form below and give it to your child's current school or program.

_____ is an applicant to Greenspring Montessori School. I hereby authorize Greenspring Montessori School to speak with my child's teacher(s). I also authorize and request _____ (current school) to forward the following records directly to Greenspring Montessori School.

1. Common Recommendation Form
2. Teachers' written reports
3. Complete transcripts of grades, including most recent term
4. Results of standardized testing
5. Results of individualized testing, such as the WISC-III, used for educational and behavioral assessment
6. If applicable, please include records of disciplinary actions

Please send these records to:

Greenspring Montessori School
10807 Tony Drive
Lutherville, MD 21093
Attn: Director of Admissions

Printed name of parent(s)/ guardian(s)

Signature

Date