



PLEASE SUBMIT TO APPLICANT'S CURRENT SCHOOL  
**Permission for Release of Records  
and Family Information**

Student's First Name		Middle	Last
Date of Birth		Grade Entering	
<p><b>Records to be released should include all records relating to student's attendance at school including but not limited to:</b></p> <ul style="list-style-type: none"> <li>• Scholastic grades</li> <li>• Standardized test scores</li> <li>• Attendance information</li> </ul> <p><b>The completed form and school records may be scanned and submitted to <a href="mailto:cdarcy@sseds.org">cdarcy@sseds.org</a>, mailed directly to St. Stephen's Episcopal Day School, faxed to 305-445-8243, or placed in a sealed envelope and given to the parent for delivery to St. Stephen's.</b></p> <p>Director of Admission St. Stephen's Episcopal Day School 3439 Main Highway Coconut Grove, Florida 33133</p>			
School releasing record(s)		Contact	
Address		Phone	
City	State	Zip	
<p><b>I/We authorize the completion of the attached form(s) regarding the student named above and release to St. Stephen's Episcopal Day School. I/We release every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents and other information provided to St. Stephen's Episcopal Day School.</b></p> <p><b>In order to complete the application, I/We authorize the release of my/our child's academic records, documents and other information requested by St. Stephen's Episcopal Day School.</b></p>			
Parent or Guardian Signature		Date	
Parent or Guardian Signature		Date	

*Please complete other side*



**To be completed by Head of School**

Did this family timely pay tuition and other required payments?  Yes  No

Was this child ever placed on probation?  Yes  No

If yes, please explain.

Was this child offered re-enrollment for the school year covered by this application?  Yes  No

If not, why not?

Does your school encourage parental involvement in school activities?  Yes  No

If so, did this family become involved in your school's activities?  Yes  No

In what way?

Does this family follow the mission of the school?  Yes  No

If not, please explain.

Name:

Position:

**St. Stephen's Episcopal Day School**

3439 Main Highway • Coconut Grove, Florida 33133  
305-445-2606 • Fax 305-445-8243 • www.sseds.org