



## Request for Records

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### PARENT/GUARDIAN INSTRUCTIONS:

Please complete and sign, and date this form in the space provided. Submit the completed form to your child's current school.

(THIS FORM IS NOT REQUIRED FOR STUDENTS CURRENTLY IN ELEMENTARY/MIDDLE SCHOOLS OF THE ARCHDIOCESE OF BALTIMORE)

Student name: \_\_\_\_\_

Present school: \_\_\_\_\_

Parent/Guardian (please print): \_\_\_\_\_

*By signing below, I grant permission for copies of my child's transcripts, standardized test scores, service hour, attendance, and discipline records to be sent to Archbishop Spalding High School.*

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### INSTRUCTIONS FOR ADMINISTRATOR, COUNSELOR, OR REGISTRAR:

Please send a copy of the student's transcripts (grade 6 to date), an explanation of your school's marking system and sectioning, standardized test scores, service hours, attendance, and discipline records to:

Admissions Office  
Archbishop Spalding High School  
8080 New Cut Road  
Severn, MD 21144-2399

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(This form is not required for applicants to grade 9 from elementary/middle schools of the Archdiocese of Baltimore)