

RECORDS RELEASE AUTHORIZATION

This form should be completed by a parent/guardian and sent directly to the applicant's present school. The current school will send the required materials directly to Triangle Day School.

_____ is being considered for enrollment at Triangle Day School.
(Student's name)

As the parent/guardian of the above named student, I am authorizing you to send my child's records to Triangle Day School.

(Parent/guardian's signature)

(Date)

To the student's current school:

Please send the following documents to the address listed below. All application materials must be received before an admission decision can be made.

***Admissions Director
Triangle Day School
4911 Neal Road
Durham, NC 27705***

- √ Most current report card and previous two years' final reports.
- √ Student's most recent standardized test scores.
- √ Student's health records.
- √ Any other school records relevant to admission (i.e. special program placement, disciplinary records, IEP, additional educational or psychological assessments).

***Triangle Day School · 4911 Neal Road · Durham, NC · 27705
919-383-8800 (phone) · 919-383-7157 (fax)***