



REQUEST FOR TRANSCRIPT AND RECORDS

Please give this request to the Registrar of your present school.

Date: _____

Applicant's Name: _____

To the Registrar: This student is applying to Waldorf High School of Massachusetts Bay. Please send the following records:

- Transcripts for the past three years
- Standardized testing
- Health Records
- Discipline Records

I hereby give my permission to:

_____ School to release the records of _____ to

Waldorf High School of Massachusetts Bay and to receive follow-up phone calls with questions.

Signature of Parent/Guardian

Please send records to:

Admissions Office
Attn: Susan Morris
Waldorf High School of Massachusetts Bay
160 Lexington Street
Belmont, MA 02478

E-mail: s.morris@waldorfhighschool.org