



St. Joseph High School • 80 Willoughby Street • Brooklyn, NY 11201

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PERMISSION TO RELEASE RECORDS

TO THE PARENTS:

Please fill in, sign and return to your child's School.

A completed report is a necessary part of the application process at St. Joseph High School.

Name of Candidate _____ Applying for Grade _____

Name of School _____

Address of School _____

City _____ State _____ Zip _____

School Phone Number _____

I give permission for the school to release my daughter's school records.

Signature of Parent of Guardian _____

Date _____

TO THE SCHOOL:

The student above is applying for admission to St. Joseph High School. Please mail a copy of her records including grades and standardized test scores to St. Joseph High School. All information will be kept confidential and used only in the admissions process.

Sincerely,

Elizabeth Peralta
Director of Admissions