

Parental Authorization for Release of Records

To the Parents:

Please complete this form and take it to your child's current school to authorize exchange of information. All records should be submitted directly to Spartanburg Day School from your child's current school.

Applicant's Name _____ Applying for Grade: _____

Current School _____ Registrar _____

School Street Address _____ City _____ State ____ Zip _____

Email for School Contact _____

School Phone _____ School Fax _____

I have submitted an application for my child to attend Spartanburg Day School in grade _____ for the school year _____.

I give permission for you to exchange information with Spartanburg Day School concerning my child for admission purposes. Please send all current information regarding: transcripts, standardized tests scores (aptitude and achievement), current classroom grades or evaluations, discipline records and immunization records. I understand that the above information will be used in evaluating my child's application.

Parent's or Guardian's Signature _____ Date _____

To the School Official:

Please send all current information regarding transcripts, standardized tests scores (aptitude and achievement), current classroom grades or evaluations, discipline records and immunization records to:

Spartanburg Day School
Office of Admission
1701 Skylyn Drive
Spartanburg, SC 29307
e: admissions@sdsgriffin.org
p: (864) 582-7539
f: (864) 582-7530