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**APPLICATION FOR ENROLLMENT FOR \_\_\_\_\_ SCHOOL YEAR**  
**TRANSCRIPT REQUEST**

**APPLICANT'S NAME:** \_\_\_\_\_

I/We authorize the release of transcripts of my/our child's academic record, including grades, progress reports, credits earned, standardized test scores, attendance and disciplinary records, health forms, current IEP's, and guidance evaluations to The Hershey Montessori School.

Applicant's Signature: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

Parent/Guardian's Printed Name: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

Parent/Guardian's Printed Name: \_\_\_\_\_

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

**INSTRUCTIONS FOR THE PRINCIPAL/DIRECTOR**

Please complete this form and attach an official school transcript including:

EXPLANATION OF THE GRADING SYSTEM • PROGRESS REPORTS • STANDARDIZED TEST SCORES  
HEALTH FORMS • CURRENT IEP'S • SCHOOL PROFILE

Return the form and attached items in the envelope provided by the applicant to Admissions at The Hershey Montessori School (address above). Your prompt attention to this matter is very much appreciated. Thank you for your assistance.

School Name : \_\_\_\_\_  Public  Non-Public

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name of Principal/Director: \_\_\_\_\_

Dates of student's enrollment at your school: \_\_\_\_\_



*Hershey Montessori School does not discriminate on the basis of gender, race, creed, ethnic or national origin, religion, disability, age, or sexual orientation in its admissions policy, financial aid program, or other educational policies.*