



## School Records Release

Applicant's Name \_\_\_\_\_ Applying for Grade \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Current School Name/Address \_\_\_\_\_

### To the Parent/Guardian:

Please sign this Release of Records Authorization before this form is taken to your child's Teacher and/or Principal. To guarantee consideration, please request that this form is sent from your child's current school *directly to Lakisha Wingard, Director of Admissions, Hershey Montessori School, 10229 Prouty Road, Concord Twp., Ohio 44077.*

*I give permission for the school records for the above student to be sent to Hershey Montessori School. I also understand that the information on this form and any additional information will remain confidential, and at no time will I have access to any part of this recommendation. I also give permission to Hershey Montessori School to contact my child's current teacher to discuss his/her recent progress.*

Signed \_\_\_\_\_ Relationship to child \_\_\_\_\_

### Please return this form to:

Lakisha Wingard, Director of Admissions, Hershey Montessori School, 10229 Prouty Road, Concord Twp., Ohio 44077

**\* Please write N/A in the sections that are not relevant for your school.**

### To the Teacher and/or Principal:

The student named above is applying to Hershey Montessori School and requesting that you complete this recommendation form. We are interested in your estimation of the applicant's academic performance, intellectual promise and personal qualities. If you would prefer to write a letter of recommendation for this student in lieu of this form, please feel free to do so. The completed form or a letter attached to the form, as well as transcripts and standardized testing, should be returned directly to Hershey by the date indicated above. Your statement will become part of a confidential admission file to be used only by those involved in our admission decision process.

Please complete this form, and attach the following information:

- An official report card and/or comment sheets from the current school year to date;
- Official transcripts, report cards, and/or comment sheets from the previous three school years (minimum);
- Results of standardized tests (percentile scores) and confidential school records (including disciplinary actions, individual testing and assessment) and, if applicable, an IEP.
- Student's current medical statement.

Is this student enrolled in classes sectioned according to ability? \_\_\_ Yes \_\_\_ No \_\_\_ Some

If so, please indicate what section(s) or track(s) (e.g. honors, advanced, regular) in which the student is enrolled.

**In what contexts have you known the applicant, and for how long?**

**Please share with us ways in which the applicant has contributed to your school community. Please include participation in activities, special accomplishments, recognitions of distinction, displays of character, or awards received.**

**Please comment on the applicant's strengths and challenges, both academically and personally.**

**Has the applicant ever undergone an evaluation for gifted programs or learning differences administered by a clinical psychologist or psychiatrist, school psychologist, or educational specialist?** \_\_\_ Yes \_\_\_ No

*If yes, please elaborate.*

**Does the applicant require or receive any special personal and/or academic support or accommodations at school (tutoring, gifted enrichment, IEP, counseling, medical, etc.)?** \_\_\_ Yes \_\_\_ No

*If yes, please elaborate.*

**Has the applicant ever been dismissed, suspended, placed on probation, or received other serious disciplinary sanctions? Has he or she withdrawn from school voluntarily for an extended period of time for reasons other than health?** \_\_\_ Yes \_\_\_ No *If yes, please elaborate.*

**Have parents attended scheduled conferences?** \_\_\_ Yes \_\_\_ No

*If no, please elaborate*

**I recommend this student to Hershey Montessori School:**

\_\_\_ enthusiastically \_\_\_ confidently \_\_\_ without reservations \_\_\_ with reservations \_\_\_ do not recommend

**Date of student's entrance to your school:** \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

School \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature of school official: \_\_\_\_\_

\_\_\_ *please send me information about Hershey Montessori School*