Transcript Request

Purnell School, 51 Pottersville Rd., P.O. Box 500, Pottersville, NJ 07979

I hereby authorize _____________________________(school) to release a copy of the transcript (attendance records, grades and standardized test scores, educational or psychological testing) of my child in grade ____________, and request that it be forwarded to Purnell School at the above address. I further authorize the school to include a letter of recommendation for my child, which will remain confidential in the Purnell Office of Admissions, and I waive my right to examine the contents of that recommendation.

Parent Signature _____________________________ Date ____________

Note to parent/guardian - please complete this card and send it to the student candidate’s current school.