



# Transcript/Records Release Form

## This Release Must be Signed to Complete Your Application!

In order for the Applicant to be evaluated for admission to St. Vincent de Paul High School, we will need to obtain information from the Applicant's current school and any previous school(s) if less than two years attendance has been completed at the present school. Please fill out, print, and sign this form and return it to:

St. Vincent de Paul High School (707)763-1032 x113 *phone*  
Attention: Admissions (707)763-9448 *fax*  
849 Keokuk Street [admissions@svhs-pet.org](mailto:admissions@svhs-pet.org)  
Petaluma, CA 94952

|                              |     |                       |   |
|------------------------------|-----|-----------------------|---|
| <b>Current School Name:</b>  |     |                       |   |
| <b>Applicant Name:</b>       |     |                       |   |
| <b>Current Grade Level:</b>  |     | <b>Date of Birth:</b> |   |
| <b>Previous School Name:</b> |     |                       | <input type="checkbox"/> Not Applicable |
| <b>Address:</b>              |     |                       |   |
| <b>City/State/Zip:</b>       |     |                       |   |
| <b>Phone:</b>                | ( ) |                       |   |

I hereby authorize and consent to the release of information which may include a transcript of grades, standardized testing, disciplinary, special education, and attendance records for the purpose of evaluating this Applicant for admission to St. Vincent de Paul High School.

I also acknowledge that St. Vincent de Paul High School will be sending a confidential school/teacher/counselor recommendation form and hereby waive rights to this form.

|                                  |                                     |                                     |                                     |                                  |                                |
|----------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------|--------------------------------|
| <b>Specific Record Request::</b> | <input type="checkbox"/> Transcript | <input type="checkbox"/> Discipline | <input type="checkbox"/> Attendance | <input type="checkbox"/> Testing | <input type="checkbox"/> SpEd. |
|----------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------|--------------------------------|

|                              |  |
|------------------------------|--|
| <b>Notes/Considerations:</b> |  |
|------------------------------|--|

|   |  |
|---|--|
| <b>Parent/Legal Guardian Signature:</b> |  |
| <b>Date:</b>                            |  |

### Attention: Applicant Schools

*Please, forward requested records, as requested for the above-named Applicant to:*

St. Vincent de Paul High School  
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Petaluma, CA 94952  
[admissions@svhs-pet.org](mailto:admissions@svhs-pet.org)  
Fax: (707)763-9448

**Thank you!**