



Immaculata-La Salle High School

AUTHORIZATION FOR RELEASE OF RECORDS



Student's Name: _____
First Middle Last

Date of Birth: _____

Grade Entering: _____

Records to be released:

- Transcript of Scholastic Grades and the Marking System Used
- Standardized Test Scores
- Attendance Record
- Educational Evaluations
- Discipline reports (Miami-Dade County Public Schools) or computerized discipline report
- Immunization Records/Health Forms

The record indicated above are to be released to:

Registrar Admissions (*Check one*)

Immaculata-La Salle High School
3601 South Miami Avenue
Miami, FL 33133
Tel: (305) 854-2334 Fax: (305) 858-5971

This paragraph is for schools outside of the United States ONLY: Transcripts in a foreign language must be translated into English and certified by a United States Consul. In addition to the mark received for each subject, foreign transcripts must show the number of classroom hours per week for each subject. If a mathematics course was taken, please indicate course content if the title is not self-explanatory. With this information, we can determine the student's placement in our curriculum.

Name of school releasing record: _____

Address:

(Address) (City) (State) (Zip Code)

Phone:

() _____

Fax:

() _____

I hereby grant permission for the release of the above record. I agree that I will not seek access to confidential evaluation materials or school records as they become property of La Salle High School.

Parent or Guardian Signature

Date