



1395 BRIDGETON HILL ROAD • UPPER BLACK EDDY, PENNSYLVANIA 18972
TEL: 610-982-5606 • FAX: 610-982-5799 • EMAIL: admissions@rivervalley.school.org

AUTHORIZATION TO RELEASE STUDENT RECORDS

In order for us to thoroughly complete the application process, you must sign and submit this form to your child's present (or last attended) school. Please take or mail this authorization form, together with the confidential teacher reference form to the applicant's school. In turn, they will mail or fax the appropriate information to River Valley Waldorf School.

Parental Authorization

I hereby authorize the school named below to provide River Valley Waldorf School with copies of the following information by mail or by fax, from my child's file as requested below:

Full name of student _____

Name of current school _____

Address of current school _____

Signature of parent or guardian _____

For the Administrator

The student named above is a candidate for admission to River Valley Waldorf School. Please mail or fax copies of the following, so that we may complete the admissions process in a timely fashion:

Current report card

Current health record

All psychological records

Testing or evaluation records

Discipline reports

Should the applicant be admitted to River Valley Waldorf School, we will send a request that all permanent records be transferred to our files. Your assistance with this request is greatly appreciated.
