

Transcript Release Authorization

Applicant's name: _____

Current school: _____ Current grade level: _____

To Parents/Guardians:

Please sign this form and take it to the applicant's current school. This form will serve as a request for the school to release your child's transcript to The Langley School.

I understand that this information is confidential. I hereby authorize the release of these records to The Langley School.

Signature of parent/guardian: _____ Date: _____

To the School:

Please send a complete transcript, test scores, and any other relevant records regarding the student's academic, social, and emotional development no later than January 31, 2019, directly to:

The Langley School
Attn: Admission Office
1411 Balls Hill Road
McLean, VA 22101
E-Fax: (703) 890-1454
E-mail: admission@langleschool.org

NOTE: Electronic copies of records are preferred