

By completing this form you are authorizing your existing school to send Fontbonne Academy your final records.

Please give this form to your current school.

(Name of Student)

has been admitted to Fontbonne Academy and has enrolled for the 2025-2026 school year.
We hereby authorize

(Name of School)

to release the following:

- Final transcripts for the 2024-2025 academic year in order to complete the final requirements for admission
- Health Record

The final transcript information should contain the student and parent/guardian name, address, phone number, course titles, course credits, grade level completed, and attendance.

Signature of Parent/Guardian

Date

Signature of Student

Date