

RELEASE OF RECORDS REQUEST

Parents - Please complete this form and deliver it to the office of your child's current school. That school will then send your child's records to Paragon.

To: _____ Date: _____
Principal, Counselor or Registrar of Present School

School: _____

For: _____ Present Grade Level: _____
Name of Student

The student named above is applying for admission to Paragon Prep. I authorize you to release copies of the information requested by Paragon Prep.

Printed name of Parent or guardian

Signature of Parent or Guardian

School registrar:

Paragon Prep appreciates your assistance in providing a complete and official academic transcript, including:

1. Current grades for the most recently completed term and complete grades for the last two full years of school.
2. Scores of all standardized tests in the applicant's file.
3. Inoculation and Vision and Hearing Testing Records

Thanks for emailing, faxing, or mailing these materials directly to:



Director of Admissions
PARAGON PREP SCHOOL

PO BOX 28730

Austin, TX 78755

Admissions: (512) 459-5040

Fax: (512) 459-1875

Email: dave@paragonprep.com