



Permission for Release of Information

Dear Parents,

Please complete the top half of this form and submit it to the guidance counselor or principal of your child's current school.

I hereby authorize _____ to release records to
Applicant's present school
Wilmington Montessori School for consideration of admission.

Name of Student: _____ Current Grade Level: _____

Parent Signature: _____ Date: _____

Instructions for Student's Current School:

Please send the following information to the Director of Admissions at Wilmington Montessori School at your earliest convenience:

1. Copy of student's official transcripts from the most recent marking period and the past three academic years
2. Results of any standardized test(s) completed within the past three years
3. Other school records relevant to admission

Please send to:

Director of Admissions
Wilmington Montessori School
1400 Harvey Road
Wilmington, DE 19810

Today's Learners; Tomorrow's Leaders.

1400 Harvey Road, Wilmington, DE 19810 www.wmsde.org PH: 302.475.0555 FX: 302.529.7004

Accredited by the American Montessori Society, NAEYC and Middle States Association of Colleges and Schools