

THE CAMPUS SCHOOL OF CARLOW UNIVERSITY

3333 Fifth Avenue • Pittsburgh, PA 15213 • 412.578.6158

RECORDS REQUEST FORM (To be completed by parent and forwarded to child's current school.)

Dear Director of Admissions,	
This Student:	
NAME OF STUDENT	BIRTH DATE
CURRENT GRADE CURRENT SCHOOL	L
is seeking admission to The Campus School	ol of Carlow University. Please send a copy of
all school records, including grades and st	tandardized test scores to:
Admissions Director The Campus School of Carlow Un 3333 Fifth Avenue Pittsburgh, PA 15213	niversity
If you have any questions, please call the	Admissions Office at 412.578.6368.
I give my permission to release the above	information.