



RECORDS RELEASE PERMISSION

Transfer Student

CURRENT SCHOOL _____ CURRENT GRADE LEVEL: _____ GENDER: ☐ MALE ☐ FEMALE

STUDENT NAME _____

MAILING ADDRESS _____

NUMBER AND STREET — OR PO BOX _____

CITY _____

STATE _____

ZIP _____

I authorize that all of the following records for my son/daughter may be sent to Chaminade-Julienne Catholic High School for the school's admissions process for the upcoming school year:

- Report cards for the last three years (*current report card will include most current quarter*)
- Attendance records (*if not included on report card*)
- Discipline records (*if applicable*)
- Standardized test scores/proficiency test scores
- Evaluation Team Report (ETR), and
- Any IEP/SP, 504 Plan or School Accommodation plan (*if applicable*)

PARENT/GUARDIAN SIGNATURE _____

PARENT/GUARDIAN PRINTED NAME _____

DATE _____

PHONE NUMBER _____

CURRENT SCHOOL TO COMPLETE THE FOLLOWING SECTION AND SUBMIT TO CJ

LEVEL OF COURSEWORK RECOMMENDED

	Honors	College Prep	General
English			
Math			
Science			
Social Studies			

ACADEMIC BEHAVIOR

	Below Average	Average	Good	Excellent
Academic Motivation				
Completion of Assignments				
Personal Initiative				

MAILING ADDRESS: Chaminade-Julienne Catholic High School
c/o Admissions
505 S. Ludlow Street
Dayton, Ohio 45402

CONTACT: Arrionne Birch-Hollis '04
Admissions Coordinator
Phone: (937) 461.3740 x249
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Email: abirch@cjeagles.org