



REQUEST FOR OFFICIAL TRANSCRIPT

To be completed by parent/guardian. Please print.

Dear Orme Parent/Guardian,

Please complete this form, and send it directly to your child's current school in care of the Registrar.

To the Registrar:

The student named below has applied for admissions to The Orme School. To complete the application, The Orme School requires an official transcript from the student's current school and school year, complete through at least the first semester. This transcript should also include the student's previous school year.

STUDENT INFORMATION

First Name	Middle Initial	Last Name
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Date of Birth (MM/DD/YYYY)

Address	City	State	Zip Code
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Province	Country
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STATEMENT OF PERMISSION TO RELEASE TRANSCRIPT

I hereby authorize the release of my child's transcript (*as outlined in the top section of this release form*) to The Orme School, for use in evaluating eligibility for admission.

Parent/Guardian Signature	Date
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Parent/Guardian Printed Name

PLEASE EMAIL, FAX, OR SEND BY POSTAL MAIL TO:

Admissions Office
The Orme School
HC 63, Box 3040
Mayer, AZ 86333
admissions@ormeschool.org
Phone: (928) 632-7601
Fax: (928) 632-7605