Media-Providence Friends School
TRANSCRIPT/RECORDS REQUEST

125 West Third Street
Media, PA 19063
610.565.1960

Parent of Guardian: Please fill in the information below and send directly to your child's current school.

_____ _____ _____
Student's Name Birthdate Grade

_____
Address

Applying for admission for school year: _____

I hereby grant permission for the release of educational records of the above-named student to Media-Providence Friends School, as I have applied for his enrollment there.

_____ _____
Date Signature of Parent

To the Registrar:

The above student has applied for admission to Media-Providence Friends School.

Will you kindly send us a copy of his or her academic record, including a current transcript and all educational and psychological test results.

In addition, any information on the student's extra-curricular activities, school behavior, and personality traits would be helpful.

The Committee on Admissions cannot reach a decision on admission without this information, and we would therefore appreciate your prompt response to this request.

If there are questions, please contact us at 610.565.1960.

Thank you for your assistance.

10/07