



**HOLY CHILD  
SCHOOL AT  
ROSEMONT**

*The joy of achievement*

***This form needs to be completed by the parent. Please fill in your child's name and applicable grade. This form MUST be signed and sent to your child's current school who will then release all records to Holy Child School at Rosemont.***

To: \_\_\_\_\_

My child, \_\_\_\_\_

has applied to **Holy Child School at Rosemont** and is a candidate for \_\_\_\_\_ grade.

I authorize all records to be released and forwarded. Thank you.

Parent's Signature: \_\_\_\_\_

**Attention Current School:**

Please release this child's academic transcript/records, results of standardized achievement or aptitude tests, attendance records, health records and any other pertinent information which would identify apparent strengths or weaknesses and patterns of behaviors. Please forward records to:

Holy Child School at Rosemont  
Director of Admissions and Marketing  
1344 Montgomery Avenue  
Rosemont, PA 19010

Thank you very much for your cooperation. Please feel free to call 610-922-1006 if you require any additional information.