

DIOCESE OF WILMINGTON
OFFICE OF TOTAL EDUCATION

RELEASE OF RECORD FORM

Date _____

Dear Principal:

_____ has been accepted as a student at

Our Lady of Fatima School.

Scholastic records, health records, and any other pertinent information should be sent to:

Miss Kathleen Kenney
Our Lady of Fatima School
801 North DuPont Boulevard
New Castle, Delaware 19720

Sincerely,

Kathleen Kenney
Principal

*AUTHORIZATION FOR RELEASE OF SCHOOL INFORMATION

I hereby authorize the chief school officer of

School _____

Address _____

City State Zip _____

to release my child's records.

Date

Parent/Guardian Signature

*Section 439 Public Law 93 380 Family Educational Rights and Privacy Act of 1974

August 1984