



# Community Preparatory School

Community  
Preparatory  
School

## Authorization for Release of Information

**To the Parent/Guardian:** Please complete the bottom of this form and return it to Community Preparatory School as soon as possible.

To: Principal/Guidance Counselor

The student named below has applied for admission to Community Preparatory School. Please forward a copy of the student's complete transcript and educational records including:

- Current and previous report cards/grades
- All standardized test scores
- Psychological and educational evaluations
- IEP/special education resource records

Any information released will remain confidential. Please send to:

**Admissions Office  
Community Preparatory School  
126 Somerset Street  
Providence, RI 02907**

Below is the parent's authorization to release this information. If you have any questions, please feel free to call Patricia McDonald Luca, Admissions Coordinator, at 401-521-9696, ext. 300. Thank you.

You are hereby authorized to send the official school transcripts and all educational records of \_\_\_\_\_ to Community Preparatory School.

Student's Full Name

Name of Parent/Guardian \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_