



Barry W. Tull
Headmaster

410-641-3575
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TRANSCRIPT RELEASE FORM

NAME OF CURRENT/PREVIOUS SCHOOL

ADDRESS OF SCHOOL

PHONE NUMBER OF SCHOOL

/ _____
FAX NUMBER OF SCHOOL

Our (My) child, _____ has applied for admission to the _____ grade at Worcester Preparatory School. We hereby give permission to have copies of pertinent records and information, including grades and test scores, forwarded to Worcester Preparatory School, P.O. Box 1006, Berlin, Maryland 21811.

Signature(s) of Parents or Guardian

Date: _____

(This form should be completed by parent and returned to Worcester Preparatory School with the application for admission.)