



ST. GABRIEL'S CATHOLIC SCHOOL
ENGAGING MINDS. INSPIRING VIRTUE.

AUTHORIZATION TO RELEASE STUDENT RECORDS

Instructions to Parent/Guardian: Please complete all information on this form and submit it to your child's current school.

The following student has applied for admissions to St. Gabriel's Catholic School.

Student Name: _____ Date of Birth: _____

Current Grade: _____ Grade Applied For: _____ Year: _____

I hereby authorize the release of the information requested below to St. Gabriel's Catholic School.

Parent/Guardian Signature

Date

Instructions to School Registrar: Please send the following information to St. Gabriel's Catholic School no later than **January 13, 2012**.

- Current report card
- Transcripts/report cards of the past two completed school years
- Standardized testing of the past two completed school years (if applicable)

Please send these materials to the address shown below:

Admissions Office
St. Gabriel's Catholic School
2500 Wimberly Lane
Austin, TX 78735

For questions, please call: 512-600-6455.

Thank you for your assistance in submitting the requested documentation.