



GULF STREAM SCHOOL

Request for Release of Records

PARENTS

Please give this completed form to the school(s) the applicant has attended.

With appropriate authorization, the applicant's school records will be forwarded directly to Gulf Stream School.

SCHOOL ADMINISTRATOR

Please forward an official school transcript, including standardized test scores, for the following student, who has applied for admission to Gulf Stream School.

FIRST NAME _____ **MIDDLE** _____ **LAST** _____

After completion, please send information to:

ADMISSIONS • GULF STREAM SCHOOL
3600 GULF STREAM ROAD
GULF STREAM, FL 33483

If you have any questions or need any additional support, please contact:

ADMISSIONS@GULFSTREAMSCHOOL.ORG

AUTHORIZING SIGNATURE OF PARENT OR GUARDIAN

SIGNATURE _____ **DATE** _____