



2018
National Blue Ribbon
School of Excellence

REQUEST FOR STUDENT RECORDS

Date: _____

To: _____

From: Our Lady of Mercy Regional Catholic School
29 Conwell Drive
Maple Glen, PA 19002
215-646-0150
Fax: 215-646-7150

Please forward the following information for the student listed:

Academic records, grades to date, along with standardized test scores, health, dental & immunization records, and any disciplinary records.

Student: _____

Date of birth: _____

I have enrolled my child, _____ in the
above school and hereby authorize you to release his/her records.

Parent signature: _____ Date: _____