



Milton Academy

Record Release Form

Office of Admission 170 Centre Street Milton, Massachusetts 02186
Telephone: 617-898-2227 Fax: 617-898-1701

To the applicant: Please complete the following information and give this form to your principal, head of school or guidance counselor, along with a stamped envelope addressed to Milton Academy.

Applicant's name _____

Name of current school _____ Current grade _____

Parental Release of Records

This is to authorize the release of a copy of my child's records as requested by Milton Academy.

Parent/Guardian Signature

Date

To the school administrator:

The student named above is a candidate for admission to Milton Academy. The admission committee places considerable weight on the academic and personal qualifications of each student. Please return the following material, along with this form, by **January 15** in the envelope provided by the applicant.

Please include:

- Final or mid-semester grades for the current fall term
- A transcript with grades for the past two years
- If not indicated on the transcript, please attach the student's attendance record
- Standardized test scores
- Recent teacher reports, if any
- A school profile, if available