TO APPLICANT’S PARENT/GUARDIAN

Please complete the top portion of this form and submit it to your child’s current school after November.

Name of Applicant: ___________________________________________  FIRST   MIDDLE   LAST

Applicant’s School: ____________________________________________

Applicant’s Current Grade: ______________ Current Academic Year: __________________

Please note transcripts will be considered invalid unless mailed directly to The Peck School by the applicant’s school.

We are unable to accept transcripts submitted by parents.

We, the parents/guardian of the above applicant, authorize the release of school records to The Peck School for purposes of admission application review.

Signature of Parent/Guardian: ___________________________________________ Date: ______________

TO APPLICANT’S SCHOOL

Please send a copy of the following to the Admissions Office AFTER the first marking period of the current school year.

1. This Transcript Request Form (signed by parent/guardian)
2. Transcript of grades for at least ONE marking period this current school year
3. Final Transcripts from the previous TWO years
4. Standardized testing results from the current and previous TWO years
5. A marking key to your grading system

Kindly return to:
Admissions Office • The Peck School • 247 South Street • Morristown, NJ 07960 • 973.539.8660