

Request for Transcript Records

Seton School
1350 Progress Drive
Front Royal, VA 22630
540-636-9990

Name of Student _____

Date of Birth _____

Records Department: This student has been enrolled in Seton School. Please send the following information at your earliest convenience. Thank you for your consideration in this matter.

**Complete Transcript of School Records
All Test Scores Available**

Name of Last School Attended _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

As the Parent or Legal Guardian, I hereby give my Permission to Release the above Records to Seton School.

Signature