



בית ספר
ע"ש ש. ז. שכטר

Solomon Schechter Day School of Raritan Valley

511 Ryders Lane, East Brunswick, NJ 08816

Telephone - 732-238-7971

Fax - 732 328-7531

www.sdsrv.org

RECORDS RELEASE FORM

_____ has applied for admission to our school.
In order to facilitate the Admission Committee in its selection process, please provide the following:

1. Progress Report, Report Card or Other Academic Records
2. Confidential Teacher Recommendation Form (enclosed)
3. Head of School/Principal Recommendation Form (enclosed)
4. Attendance Record
5. Standardized Test Scores (if applicable)
6. Reports of Psychological or Learning Evaluations (if applicable)

We would appreciate receiving this material no later than _____.
Please mail all forms and records to:

Ruth Bash, Director of Recruitment
Solomon Schechter Day School of Raritan Valley
511 Ryders Lane
East Brunswick, NJ 08816

I consent to the release of all the above information to the Solomon Schechter Day School of Raritan Valley Admissions Office. I understand that by signing below I waive the right to read the confidential recommendation forms and the school report for the student listed above.

Name of Parent _____

Signature of Parent _____ Date _____

Child's Date of Birth _____

Name of School _____

Address of School _____

School Telephone Number _____