



REQUEST FOR TRANSCRIPT

Dear School Official:

(Name of Student) (Current Gr.) (Date of Birth)

The candidate listed above is applying for admission to Miss Hall's School. Please release the student's transcript to:

Office of Admissions
Miss Hall's School
492 Holmes Road
Pittsfield, MA 01201
USA

Transcripts may also be emailed to info@misshalls.org or faxed to (413) 448-2994.

If you have any questions, please contact the Admissions Office at (413) 499-1300 or by email to the address stated above.

If the original transcript is not in English, it MUST be translated into English.

PARENT AUTHORIZATION TO RELEASE SCHOOL RECORDS

TO BE COMPLETED BY PARENT OR GUARDIAN:

I, the undersigned, grant permission for Miss Hall's School to receive the requested information.

Name of Parent or Guardian (please print)

Signature of Parent or Guardian

Date