



REQUEST FOR ACADEMIC RECORDS

Parents: Please complete this section before giving the form to the head of your daughter's school.

Student's Name: _____ Date: _____

Current School: _____ Current Grade: _____

Parent's Signature: _____ Telephone: _____

Parent's Email: _____

SCHOOL HEAD: The above student has applied for admission to Brookewood School. Please supply the information requested below, or substitute your own form(s). All information will remain confidential.

I. ATTENDANCE

	Current Year (to date)	Prior Year
Days Absent	_____	_____
Days Tardy	_____	_____

II. GRADES

	Current Year (to date)	Prior Year
English	_____	_____
Math	_____	_____
Social Studies	_____	_____
Science	_____	_____

III. ACADEMIC STANDING

- How many students are in the candidate's current grade school? _____
- In which quarter of these students does the candidate rank academically? (Circle one)
 Top Quarter Second Quarter Third Quarter Bottom Quarter

III. STANDARDIZED TEST SCORES

Please enclose a copy of any recent standardized test results.

Person completing form: _____ Date: _____

Position: _____

Please return to: Director of Admission
Brookewood School
10401 Armory Ave.
Kensington, MD 20895