



SAINT THOMAS THE APOSTLE SCHOOL

The Catholic School of Bloomfield

TRANSCRIPT & RECORDS RELEASE REQUEST

I authorize _____
(Name of former school)

(Street address of former school)

(City, State and Zip of former school)

To release school records for _____
(Student's name)

Entering grade _____ at St. Thomas the Apostle Parish School

Kindly forward all:

- Academic Records
- Health Records
- Other information which would be useful for placement.

(Parent's/Guardian's name please print)

(Parent's/Guardian's Signature)

(Date)

Please forward all records/information to:

**Mr. Michael Petrillo, M.Ed., Principal
Saint Thomas the Apostle Parish School
50 Byrd Ave.
Bloomfield, NJ 07003**

(Please note that this does not constitute an acceptance commitment from administration.)

50 Byrd Avenue, Bloomfield, New Jersey 07003 † 973.338.8505 † www.staschoolnj.org

When you enroll your child, we enroll your family.