



ST. DOMINIC SAVIO

CATHOLIC HIGH SCHOOL

Applicant Release for Records Request

TO _____ **Date** _____
(Principal/Counselor/Registrar of Applicant's Current School)

The student named below is applying for admission to St. Dominic Savio Catholic High School. I authorize you to release copies of the information requested by St. Dominic Savio Catholic High School.

Applicant's Name _____ Present Grade _____

(Signature of Parent or Guardian)

After signing, please give this form to the Registrar at applicant's current school.

REGISTRAR

St. Dominic Savio Catholic High School appreciates your assistance in providing a complete official academic and disciplinary file for the applicant.

Please send copies of the following items:

- Applicant's transcripts (grades) for the last 3 years of enrollment, **including** the most recently completed term
- Standardized Test Scores for the last 3 years
- Disciplinary record, if applicable

Please send these materials directly to:

St. Dominic Savio Catholic High School † Office of Admissions
9300 Neenah Avenue
Austin, Texas 78717
512.388.8846 phone † 512.388.1335 fax

Thank you for your assistance