

End of Year Record Release Form (Transfer Students)

Instructions for Parents/Legal Guardians: Please complete the permission form below and submit it to your *student's current high school* allowing necessary enrollment documents to be sent directly to St. Joseph High School.

Instructions for High School Officials: Upon receipt of signed permission below, please submit an official transcript and student medical records to St. Joseph High School. Documents may be mailed, emailed or faxed.

Student's Name:	
I give permission to _	School to provide the following (Name of Current School)
	g my child to the Admissions Office at St. Joseph High School. If these records are not sty of the 2023-2024 academic school year, the above student cannot start at St. Joseph High
	Official Transcript
	Medical records from school nurse
Signature of Parent or	Legal Guardian:

St. Joseph High School

2320 Huntington Turnpike | Trumbull, CT 06611

Office of Admission

admissions@sjcadets.org
P: 203.378.9378 x308 | F: 203.378.7306

School Nurse dmiller@sjcadets.org P: 203.378.9378 x307 | F: 203.378.7306