

$\frac{\texttt{AUTHORIZATION} \ \ \texttt{FOR} \ \ \texttt{RELEASE} \ \ \texttt{OF} \ \ \texttt{RECORDS}}{\texttt{FROM} \ \ \texttt{APPLICANT'S} \ \ \texttt{CURRENT} \ \ \texttt{SCHOOL}}$

PARENTS: Please complete and sign this form and then submit it to your child's counselor or Head of School. Please also provide a stamped envelope, pre-addressed to the Harvard-Westlake Admission Office, to the administrator. Please ask the school to mail the transcript and testing to Harvard-Westlake directly.

The following student has	applied for admission to Harvard–West	ake School:		
LAST NAME	FIRST NAME	BIRTH DATE	CURRENT GRADE	
I hereby give permission to	o release copies of the above-named stud	lent's cumulative records.		
SIGNATURE OF PARENT OR GUARDIAN			DATE	
To the School:				
Please send the following	nformation to Harvard–Westlake on or	before January 15, 2016:		
* *	t's transcript, including grades from the first trimester/semester report card or	· ·	testing results.	

PUBLIC RECORD FILE
PUBLIC LAW 93-380, SECTION 438

HARVARD-WESTLAKE SCHOOL ADMISSION OFFICE, 700 NORTH FARING ROAD, LOS ANGELES, CA 90077, TEL 310.288.3200, FAX 310.288.3212