

**AUTHORIZATION TO RELEASE INFORMATION**  
(Please give to student's current school)

**FOR APPLICATION PURPOSES AUTHORIZATION IS HEREBY GRANTED TO:**

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Name of agency **sending** information or records to St. Francis de Sales School

TO RELEASE INFORMATION FROM THE  
SOCIAL/PSYCHOLOGICAL/MEDICAL/EDUCATIONAL RECORDS OF:

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Name of student

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Current grade

PLEASE SEND TO ST. FRANCIS DE SALES CATHOLIC SCHOOL: (address below):

1. Complete transcript of grades
2. Current year grades
3. Attendance records
4. Conduct grades
5. Achievement and ability test results
6. Key to grading system

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Authorized signature of parent/guardian

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Date

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Printed name of parent/guardian

ST. FRANCIS DE SALES CATHOLIC SCHOOL  
ATTN: ADMISSIONS  
8100 ROOS RD.  
HOUSTON, TX 77036

PHONE: 713/774-4447 FAX: 713/271-6744 WEBSITE: [www.sfdsschool.org](http://www.sfdsschool.org)

