



GOTTESMAN
RTW ACADEMY

**AUTHORIZATION TO RELEASE RECORDS
for students entering GRTWA**

NAME OF SCHOOL: _____

ADDRESS: _____

I, the parent/guardian of _____,

who attended above-named school, hereby authorize the above school to forward the following information to the Gottesman RTW Academy:

1. Academic Records
2. Health Records
3. Achievement Test Scores
4. Aptitude/I.Q. Scores
5. Other Test Scores
6. Any other pertinent information

Parent/Guardian's Name _____

Signature _____

Date _____