



THE NEW SCHOOL

Request for Transcript

Dear Parents:

Because most schools require written parental authorization before releasing transcripts, your signature on this form will greatly facilitate our admission process. Please complete the information below and submit this form to your child's school so we are able to obtain copies of your child's transcript and testing results.

Applicant's Name: _____

Current School: _____

The undersigned hereby authorizes the release of the information and material listed below to The New School.

Signature of Parent/Guardian

Date

Dear School Administrator:

The above named student is applying to The New School. Please provide to us:

- Transcripts for the previous year
- Transcripts for the current year (results for the 1st trimester or 1st two quarters)
- Results of standardized testing

This information can be sent be email or US Mail to:

Admissions Office
The New School
655 Memorial Drive SE
Atlanta, GA 30312
Phone: 404-500-9753
E-mail: sarah.roberts@tnsatlanta.org