

Cleveland · Jesuit · 1886

STUDENT RECORDS RELEASE REQUEST

Date Requeste	ed:	
	med BELOW has applied as a studed ds/information to allow us to proce	ent to Saint Ignatius High School. We are requesting the ss the application:
	☐ Official academic transcript	
	☐ Standardized testing results (I	MAP, OST, Iowa) and/or other academic evaluations
	☐ IEP, 504 plan, ETR, or service	e plan; if applicable
Student Name	•	
Date of Birth:		
Parent/Guard	ian Name:	
Parent/ Guard	lian signature:	
Current Grade	:	
Current Schoo	ıl:	
Address:		
ATTN:		
	TO BE COMPLETE	D BY THE CURENT SCHOOL
		nancial standing with your school? If no, please explain in the
Transcripts / Re	ecords Provide by:	
Transcripto/ Re	cords i foride by.	
		Title:
Contact number	r/email:	

Please send the requested items to:

Saint Ignatius High School ATTENTION: Admissions Office 1911 West 30th Street Cleveland, OH 44113 - OR -

Email records to: ngalmarini@ignatius.edu