



ST. LOUIS
UNIVERSITY HIGH

**RECORDS RELEASE FORM
TRANSCRIPTS AND SCHOOL RECORDS
MIDDLE SCHOOL**

I authorize release of cumulative records for 6th, 7th, and 8th grades for the student listed below.

Student's Full Name: _____

Please include the student's report cards, standardized test scores, discipline records, and diagnostic test results, if applicable. Records should be mailed or emailed to:

Ann C. Murphy
Office of Admissions
St. Louis University High School
4970 Oakland Avenue
St. Louis, MO 63110

amurphy@sluh.org

If you have any questions or would like to fax records, please contact Ann Murphy at (314) 269-2099 or amurphy@sluh.org.

Signature of Parent: _____ Date: _____