



New Summit School  
New Learning Resources School District

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## Permission to Release Records

Name of Student: \_\_\_\_\_ Current Grade: \_\_\_\_\_

The above student has applied for enrollement in New Summit School in the New Learning Resources School District.

PLEASE SEND A COPY OF THE FOLLOWING RECORDS:

\_\_\_\_\_ Cumulative Record

☒ Transcript

\_\_\_\_\_ Current Grades

☒ Report Card

☒ Immunization Record and Birth Certificate

☒ IEP and all Special Education Records

☒ Behavior Report

**New Learning Resources School District  
Admissions Office  
P.O. Box 12347  
Jackson, MS 39216**

**I request that a copy of the official record of my child's current grades and transcript, in addition to any behavior or discipline records, be forwarded to the New Learning Resources School District Admissions Office. I also authorize the administration and/or counselors of my child's current school to discuss my child's record with the administration and/or counselors of New Learning Resources.**

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date