



## Wheeling Country Day School

8 Park Road  
Wheeling, WV 26003  
304-232-2430  
www.wcdsedu.com

### Authorization for Release of Student Records

I hereby grant permission to \_\_\_\_\_  
name of child's current school

Complete Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

to release the records listed below for my child \_\_\_\_\_  
name of child

currently in grade \_\_\_\_\_ at the above named school.

#### Please send all records to:

Director of Admissions  
Wheeling Country Day School  
8 Park Road  
Wheeling, WV 26003

- Attendance
- Grades
- Standard Tests Results
- Psychological Evaluations
- Health Records
- Other Information Pertinent to Placement

The undersigned releases every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents, and other information provided to Wheeling Country Day School for admissions purposes.

\_\_\_\_\_  
signature of parent or guardian

\_\_\_\_\_  
date