

Mālamalama Waldorf School

HC 3 Box 13068 • Keaʻau, Hawaiʻi 96749-9220 Phone (808) 982-7701 • Fax (808) 982-7806 info@hawaiiwaldorf.org • www.hawaiiwaldorf.org

Consent for Release of Information

Parent/Guardian Instructions:

- ❖ If you are submitting an Application for Admission into Grade 1-8, please complete this form and submit it to your child's current school. Your Admission Application is not complete until records are received.
- ❖ If your child has been accepted and you are enrolling, please complete this form and submit to Mālamalama Waldorf School.

	Date of Birth
First	Middle
Records Requested from Current/Previous School: School Name	
	Fax
Dear Registrar/School Official, The above named student:	
the student's	aldorf School. Please forward to our address or fax academic record for the past TWO school years, grades, test scores, attendance, IEP, special testing
	Date
	/aldorf Schoo or fax number g report cards and health re ālamalama W the student's evaluations, g

Thank you for your immediate attention to this request. If you have any questions, please call Mālamalama Waldorf School at (808) 982-7701.