



# VIRGINIA BEACH FRIENDS SCHOOL

*Knowledge. Character. Community.*

## **FRIENDS SCHOOL**

1537 Laskin Road  
Virginia Beach, VA 23451  
Telephone 757.428.7534 Fax 757.428.7511  
[www.vbfschool.org](http://www.vbfschool.org)

## **Authorization for Release of Records**

Please sign and return to the Director of Admissions with application and application fee

Name of Current School: \_\_\_\_\_

School Phone Number: \_\_\_\_\_ School Fax Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Student's Name: \_\_\_\_\_

Has applied for enrollment to Friends School for the \_\_\_\_\_ school year.

Please forward all **academic, psychological, behavioral and discipline**  
records for said named student.  
(Please include IEP and 504 applicable.)

Students DOB: \_\_\_\_\_

Current Grade: \_\_\_\_\_

I hereby authorize the release of all academic records, psychological records, discipline records, test scores and health records to Virginia Beach Friends School. Please include all confidential records.

\_\_\_\_\_  
Printed name of Parent and/or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature name of Parent and/or Guardian