



151 Gropp Avenue Hamilton, NJ 08610  
Phone: 609-585-7733 Fax: 609-581-8436  
www.srsnj.org

Inspired by Faith Empowered by Knowledge United by Community

**Request For Student Records**

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_

The student listed above has been accepted for entrance to Saint Raphael School. Please forward the following documentation to complete this student's file:

- All Health and Academic Records
- Child Study Team Reports/Individual Service Plans
- Confidential Materials to Support Learning
- Other-Additional Information Which May Be Pertinent

Please contact the Main Office if you have any questions regarding the requested information (609) 585-7733.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date