



## Request for Student Records

**PARENTS: Complete all information below and return this form to your Guidance office.**

Applying for Grade \_\_\_\_\_

Applicant's Full Legal Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current School \_\_\_\_\_

Address \_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_ Principal/Headmaster \_\_\_\_\_

**Parents:** Please check if your child has any special educational needs identified in the following report:

|                     |                   |
|---------------------|-------------------|
| _____ IEP or ISP    | _____ 504         |
| _____ Resource Room | _____ Other _____ |

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

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### ***For office use only:***

#### **Guidance Department:**

The student named above is applying for admission to Donovan Catholic. Please forward the following materials:

- Report Cards – current report card and report cards for the two previous years
- Standardized test scores
- Attendance and Discipline Records
- Special Needs Documentation as noted above by the parent
- Health Form Copy of State Form A-45

Thank you in advance for your assistance. Please feel free to contact me if you have any questions.

#### **Please mail information to:**

Donovan Catholic  
711 Hooper Avenue  
Toms River, NJ 08753  
ATTN: Tara Mulligan, Admissions Coordinator  
732-349-8801 ext: 2425