



Our Savior Lutheran School

98-1098 Moanalua Road, 'Aiea, Hawai'i 96701-2617
Tel: 808.488.0000 <http://osls-hawaii.org>

TO THE PARENT OR GUARDIAN:

Please complete and sign the Information Release Consent printed below and type or print your child's name and current grade on the reverse side, then submit this to an official at your child's **current school**.

INFORMATION RELEASE CONSENT

I, _____, parent or legal guardian
Parent/Legal Guardian's Printed Name

of _____ hereby grant permission to
Student's Printed Name

_____ to release these copies of our
Current School's Printed Name

child's educational records to Our Savior Lutheran school:

- 1) Standardized testing results
- 2) Courses and grades (current first semester and previous year)
- 3) Personal comments and impressions

Parent/Guardian Signature

Date

Street Address, City, State, Zip Code

Telephone

TO THE SCHOOL ADMINISTRATOR:

We sincerely appreciate your willingness to complete the Confidential Administrator Report for this applicant. Should you have any questions, please contact our office at (808) 488-0000.

CONFIDENTIAL ADMINISTRATOR REPORT

STUDENT'S NAME _____ APPLICANT FOR GRADE _____

Please send the following information for the previous year and current semester to
Our Savior Lutheran School:

1. Standardized Test Results
2. Courses and Grades

If you know the applicant, please also give us your personal comments and impressions regarding his/her character and academic performance.

School: _____ City: _____ State: _____

Your Position: _____

Signature: _____ Date: _____

Mail Directly To:
Our Savior Lutheran School
98-1098 Moanalua Road
'Aiea, HI 96701-4617