



Maple Village Waldorf School  
4017 E. 6th Street  
Long Beach, CA 90814  
(562) 434-8200  
[info@maplevillageschool.org](mailto:info@maplevillageschool.org)

### Consent for Release of Records

**Current / Previous School:**

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

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Dear Registrar / School Official:**

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

**is applying** for admission to Maple Village Waldorf School.  
Please forward copies of the last 2 years of grades/narrative report cards currently in the student's file.

**has enrolled** at Maple Village Waldorf School.  
Please forward the student's cumulative records (i.e. withdrawal grades, transcript, IEP, immunization records, medical, behavioral and confidential folders).

**With Parent/Guardian Permission From:**

Parent/Guardian Name: \_\_\_\_\_

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

Please forward student records to:  
Maple Village Waldorf School, 4017 E. 6th St., Long Beach, CA 90814 or email to [info@maplevillageschool.org](mailto:info@maplevillageschool.org). We do not have fax capabilities. Thank you!