



**IMMACULATE  
CONCEPTION  
SCHOOL**

ACADEMICS • COMMUNITY • FAITH

## Request for Release of Records

To: \_\_\_\_\_  
*Name of Current School*

\_\_\_\_\_  
*Phone Number of Current School*

<b>Student Name</b>	<b>Current Grade 2022-2023</b>

The above-named student(s) is applying to Immaculate Conception School. Please forward report cards and standardized testing results, as well as any documents relating to special educational needs, recommendations or accommodations, at your earliest convenience, to our Admissions Office, for each student listed.

Name of Parent/Guardian (*please print*) \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

*Please mail, email or fax documents to:*

Immaculate Conception School  
Attn: Admissions Office  
112 Ware Avenue  
Towson, MD 21204  
Fax: 410-427-4895

Email: [admissions@theimmaculate.org](mailto:admissions@theimmaculate.org)

Fax: 410-427-4895

*Thank you for your cooperation! Questions? Please call Mrs. Alethea Spear, Director of Admissions, at 410-427-4903.*