



Milford Academy Admissions Office
P.O. Box 878, New Berlin, NY 13411
Tel: (607) 847-9260 Fax: (607) 847-9250
www.milfordacademy.org

Transcript Release Form

(Please Print)

Full Name: _____
 First Middle Last Applying for Grade

Instructions to the Students Parent (s)/ Guardian: Please complete this form and have it delivered to the guidance office at the student's current school. If you have any questions or difficulties in having materials sent to Milford Academy, please contact our Admissions Office.

To the Guidance Office, at the Student's current school: The above-named student applied for admission into Milford Academy at their parent (s) /guardian request (by the signature below), please send copies of the following materials to "Admissions Office". Milford Academy, PO Box 878, New Berlin, NY 13411:

1. Academic transcripts (including courses, final grades, and an explanation of the school's grading system).
2. ACT/SAT Standardized test data
3. Records and evaluations pertaining to any placement in special education programs.
4. Health and immunizations records.
5. Recommendations (three confidential forms to be completed, accompanying this document).

The Milford Academy Admissions office appreciates your vital assistance in this application process. If you have any questions or concerns about this request, please call us.

Release Statement

I hereby request that (Name of School) _____

(School Address) _____

Release the materials listed above to the Admissions Office at Milford Academy.

Signature of Parent or Guardian Responsible for the Student

Dated