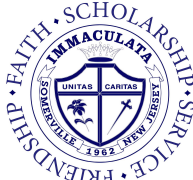


IMMACULATA HIGH SCHOOL

240 Mountain Ave., Somerville, NJ 08876

APPLICANT



GRADE FORM

Submit this form to current Elementary School

Permission to Release Records

I, _____, formally request from _____
Signature of Parent/Guardian *Name of current school*

_____, _____,
City or Town *School Telephone*

that a copy of the **cumulative records from grades 6-8**, and a **transcript of all standardized test scores** for the student named below be sent as soon as possible after the first marking period to Immaculata High School.

Student Information (to be completed by parent/guardian)

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Last Name *First Name* *Middle Initial* *Date of Birth*

--	--	--	--

Street Address *City or Town* *State* *Zip Code*

--	--	--

Parent/Guardian Name *Home Phone* *Parent Email Address*

School Record Information - School Official Complete or Attach Copies of Records

Subject	Grade 6 Final Grade	Grade 7 Final Grade	Grade 8																			
			Q1	Q2	Q3	Q4																
Religion							<div style="text-align: center;">Grade Scale</div> <table style="width: 100%; font-size: 0.8em;"> <tr> <td>A+ 96-100</td> <td>D+ 69-71</td> </tr> <tr> <td>A 91-95</td> <td>D 65-68</td> </tr> <tr> <td>B+ 86-90</td> <td>F 64 or lower</td> </tr> <tr> <td>B 81-85</td> <td>N/A Not Applicable</td> </tr> <tr> <td>C+ 77-80</td> <td>P Pass</td> </tr> <tr> <td>C 72-76</td> <td></td> </tr> </table> <div style="text-align: center;">Attendance: Days Absent</div> <table style="width: 100%; font-size: 0.8em;"> <tr> <td style="width: 50%;">Grade 6: _____</td> </tr> <tr> <td>Grade 7: _____</td> </tr> <tr> <td>Grade 8: _____</td> </tr> </table>	A+ 96-100	D+ 69-71	A 91-95	D 65-68	B+ 86-90	F 64 or lower	B 81-85	N/A Not Applicable	C+ 77-80	P Pass	C 72-76		Grade 6: _____	Grade 7: _____	Grade 8: _____
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C+ 77-80	P Pass																					
C 72-76																						
Grade 6: _____																						
Grade 7: _____																						
Grade 8: _____																						
Reading																						
Language Arts																						
Mathematics																						
Social Studies																						
Science																						
Computer Education																						
Foreign Language																						

Please call me for more information regarding this student. _____ - _____ - _____ Name: _____

Check this box if student has been suspended or expelled. If checked, please provide additional information on back.

Comments of Grade 8 teacher and/or principal: _____

Principal's Signature *Date*

**THE COMPLETED FORM SHOULD BE MAILED DIRECTLY TO:
 IMMACULATA HIGH SCHOOL ADMISSIONS OFFICE, 240 MOUNTAIN AVE., SOMERVILLE, NJ 08876**