



TRANSCRIPT REQUEST FORM

Please complete this form and submit it to the school that your student currently attends or has attended. The school will forward records directly to us.

Student Name _____

Current Grade _____ Student Date of Birth _____

I give my permission to release the following information to Benilde-St. Margaret's Admissions Office:

- Current year's report card**
- Previous year's final transcript**
- Most recent standardized test results**
- Behavior records**
- Attendance records**

Signature of Parent/Guardian _____

Date _____

SCHOOLS

The Admissions Office must receive the above materials in order to proceed with the admissions process. It is preferred to scan and e-mail back the above information. Please send the requested materials within a week of receiving the transcript request to:

ADMISSIONS OFFICE
Benilde-St. Margaret's School
2501 Highway 100 South
St. Louis Park, MN 55416

Phone 952-915-4345
Fax 952-920-8889
Admissions@BSMschool.org
www.BSMschool.org