

**CALDWELL-WEST CALDWELL PUBLIC SCHOOLS**

**Washington Elementary School  
201 Central Avenue  
West Caldwell, N. J. 07006**

**Dalia Mirrione, Interim  
Principal 973-228-8941**

To: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dear

The student(s) listed below has(have) registered at the Washington School in West Caldwell, NJ. Please forward academic and health records, and any information you may have which might prove helpful to us, such as achievement test and mental maturity test results.

We shall greatly appreciate having this information at your earliest convenience so that we may help this child in his adjustment to a new environment.

Sincerely,

Dalia Mirrione,  
Interim Principal

\_\_\_\_\_  
Name

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Name

\_\_\_\_\_  
Grade

I authorize the release of all school records for the above child(ren).

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian