

WILSON SCHOOL

Scott Keena, Principal

Orton Road
West Caldwell, N.J. 07006
973-228-7173
Web: www.cwcboe.org

Date:

Dear

_____, a former of student of _____ School,
has enrolled in Wilson School, West Caldwell, NJ.

Kindly forward any pertinent files/records in order that we may better guide him/her
while enrolled in our school.

Your cooperation in this matter is greatly appreciated.

Sincerely,

Scott Keena
Principal

I hereby give my consent to have records released to Wilson School, West Caldwell, NJ
in reference to:

_____ Grade _____

_____ Grade _____

Parent Signature _____ Date: _____

- ___ Psychological records
- ___ Scholastic records
- ___ Health Records
- ___ Testing Information
- ___ Discipline records