

ORCHARD HOUSE SCHOOL

500 North Allen Avenue Richmond, Virginia 23220 804.228.2436 www.orchardhouse.org



Request for Records

Parents: Please complete this form, being sure to sign and date it, and give it to your daughter's current school.

TO:

Name of School

Mailing Address

Student's Full Name _____

Date of Birth _____

This student is seeking enrollment at Orchard House School. Please send to Orchard House School a transcript of academic records, including the following:

- Record of all academic work (report cards), including teacher comments;
- Standardized testing results;
- Immunization records;
- Any diagnostic results and recommendations made by qualified professionals which will help meet the social, emotional, and/or academic needs of the student.

Please send these items to:

Orchard House School
Attention: Melody Imburg
500 North Allen Avenue
Richmond, Virginia 23220
Phone: 804.228.2436
Fax: 804.228.1069