



St. Elizabeth Ann Seton Catholic School

1300 Carolina Forest Boulevard

Myrtle Beach, SC 29579

843-903-1400

RECORDS REQUEST FORM

Applicant's full name:

First Middle Last

Current grade level _____

Date of birth ____ / ____ / ____

Home phone () _____

Applicant's address:

Street address _____

City _____ **State** _____ **Zip code** _____

The student listed above is an applicant for admission to St. Elizabeth Ann Seton Catholic School. Please release to Seton Catholic School the following records: (1) a certified copy of the complete records (including official transcripts, report cards and all standardized test results), (2) immunization and health records, (3) a copy of all disciplinary records.

Name of current school _____

Street Address _____

City _____ **State** _____ **Zip code** _____

Name of Parent (please print) _____

Signature _____ **Date** _____

Please send the above named records by fax 843-903-1402 or mail to:

St. Elizabeth Ann Seton Catholic School

1300 Carolina Forest Boulevard

Myrtle Beach, SC 29579