



REQUEST FOR RECORDS

Date: _____

Previous School: _____

Address: _____

City, State Zip: _____

_____ has registered at St. Mary's Catholic School
Student's Name

for the _____ school year.

Please forward my child's school records to:

St. Mary's Catholic School
713 S. Travis Street
Sherman, Texas 75090
817/419-7080 (fax)

Parent's Signature