

The Laurel Hill School

201 Old Town Road, East Setauket New York 11733

Phone: (631) 751-1154 • Fax: (631) 751-2421

www.laurelhillschool.org

Dear _____:

My child, _____, is being considered for admission to The Laurel Hill School.

This letter is to advise you that the administrators of The Laurel Hill School have my permission to request all records regarding my child, including social, personal and educational data. I further grant permission to the faculty and administrators of my child's current school to discuss all matters concerning my child by telephone interview with the administrators and teachers of The Laurel Hill School.

Your cooperation is greatly appreciated.

Very truly yours,

Parent Signature

Date