

**ST. JOAN OF ARC SCHOOL**  
**101 Evans Road**  
**Marlton, NJ 08053**  
**856-983-0774**

**GRADES 1-8**

Date: \_\_\_\_\_

To: Principal

School \_\_\_\_\_

Address \_\_\_\_\_

Re: \_\_\_\_\_

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We would appreciate you forwarding to us at your earliest convenience the scholastic and health records for the above named student(s) who will enter our school in September 2024.

Thank you.

Sister Patricia Pycik, Principal

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I give my permission for my child's records to be forwarded to St. Joan of Arc School.

Parent Signature \_\_\_\_\_ -