



TORAH SCHOOL OF GREATER WASHINGTON

REQUEST FOR TRANSFER OF RECORDS

**Please mail this to the previous educational institution
that your child attended.**

**ACADEMIC
EXCELLENCE
SINCE 1994**

Rabbi Yitzchak Charner
Headmaster Emeritus

ADMINISTRATION

Rabbi Shmuel Lichtenstein
Head of School

Julie Malka
General Studies Principal

Rabbi Yisrael Herzberg
Assistant Judaic Studies Principal

Zev Teichman
Executive Director

Matthew Manes
Director of Development

BOARD OF DIRECTORS

Raanan Shames
President

Justin Moskowitz
Joey Schmerling
Treasurers (acting)

Jodi Mailman
Recording Secretary

DIRECTORS

Rachel Burnham
Sarah Dollman
Bayla Goodman
Barry Graham
Isaac Moses
Justin Moskowitz
Rabbi Eliyahu Reingold
Joey Schmerling
Kami Troy

2010 Linden Lane
Silver Spring, MD 20910

PH: 301-962-8003

www.tsgw.org

Date

Name of School

Address

City, State, Zip code

To Whom It May Concern:

Please release all educational, medical, and/or psychological records regarding my child,

_____, to:

Torah School of Greater Washington
Attention: Registrar
2010 Linden Lane
Silver Spring, MD, 20910

I give permission to the administrators and staff of

_____ to give written and verbal evaluations of my child to the administrators and staff of the Torah School.

Thank you.

Sincerely,

Parent's Signature

