



# TRANSCRIPT RELEASE

7301 Sardis Road • Charlotte, NC 28270 • (704) 366-5657 • www.charlottechristian.com

**Note to parent(s):** After completing this form, please send it directly to your child's current school. They will return the requested information to Charlotte Christian School.

**Note to current school:** Please submit copies of report cards and standardized test scores for this year and previous years with this release form.

Applicant's Full Name - Last	First	Middle
Current School	Principal	School Phone Number
School Address	School Fax Number	

**To: Current Principal/Headmaster/Registrar:**

Our child has applied to Charlotte Christian School for the \_\_\_\_\_ grade for term beginning \_\_\_\_\_, 20\_\_\_\_\_

Please release copies of the following:

- Complete transcript of grades
- All standardized test scores
- Immunization and health records
- Any other pertinent information concerning this student

I, \_\_\_\_\_ (parent or guardian), do hereby declare that I am legally responsible for the release of information concerning said student, and I do hereby request and authorize \_\_\_\_\_ School to send Charlotte Christian School copies of all records pertaining to said student, upon receipt of this release request.

For applicants to the early education program, I authorize staff of the admissions office of Charlotte Christian School to visit and observe the applicant in his/her current setting. I understand that this information will be considered confidential and will be used by proper authorities of Charlotte Christian School for admission purposes only.

Signature of Parent or Guardian	Date
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**In a sealed envelope, please send the records to:**  
 Charlotte Christian School • Admissions Office  
 7301 Sardis Road • Charlotte, North Carolina 28270

**Thank you for assistance in providing us with this information.**