



**G R A C E
CHRISTIAN
SCHOOL**

School Records Release

Parents: Please complete and sign this form and forward it to your son's/daughter's present school. The school will then forward your child's records to Grace Christian School. An admission decision will not be made until we receive records from your child's previous school.

SCHOOL INFORMATION:

Current School _____

STUDENT INFORMATION:

Name _____ Date of Birth: _____ Current Grade _____

Address: _____ City _____ State _____ Zip _____

AUTHORIZATION TO SCHOOL AND SIGNATURE OF PARENT/GUARDIAN:

I hereby authorize the release of all records concerning the above-named student to Grace Christian School in Staunton, VA, to which the student has applied for admission.

Parent/Guardian _____

Signature _____ Date _____
Parent/Guardian

SCHOOL REQUEST:

The above-named student has applied to Grace Christian School for the _____ School Year. Please forward copies of the following information.

- Academic Records (including current report card/progress report, and scholastic record/grading scale and transcript for grades 9-12)
- Standardized Test Scores
- Psychological/Sociological Reports (including speech or other learning difficulties)
- Health Records (including proof of immunization and most recent physical exam form)
- Behavioral Records (including discipline and attendance records)

Please mail to: Grace Christian School Attention: Admissions 19 S Market Street Staunton, VA 24401	Phone: 540-886-9109	Fax: 540-886-2761	Email: admissions@gcswarriors.org
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