



Moblely D' Elite Academy

Request for Records

This student is applying for admission to Mobley D' Elite Academy in accordance with the provisions of the Family Education Rights and Privacy Act of 1974, please send Mobley D' Elite Academy the items below:

Student's Name

Current/Previous School

Date of Birth

School Street Address

Current or Completed Grade

City, State, Zip

Phone Number

PLEASE MAIL OR EMAIL

- **Birth Certificate**
- **Immunization form (GA 3032)**
- **Current or Last Year Report Cards**
- **Official Transcript**
- **Explanation of your grading scales (if grades are used)**
- **Standardized Test Scores**
- **Discipline Report**
- **Psychological or IEP Testing**
- **Other pertinent information**

Parent/Guardian's Name

Parent/Guardian's Signature

Date

Thank you for your cooperation.

Principal



Parental Permission for Release of Records

You have my permission to send the records requested above to:

Moblely D' Elite Academy

5538 Old National Hwy, Suite 100

South Fulton GA, 30349.

Parent/Guardian's Name

Date