



TRANSCRIPT RELEASE FORM

2380 Lake Shore Rd South
Denver, NC 28037
704.775.3724

School Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Student's Full Name: _____ Current Grade: _____

Date of Birth: _____ Student Address: _____

City: _____ State: _____ Zip: _____

The above student has applied to enter grade _____ at Starboard Christian Academy.

We are requesting all of the following information:

- Transcripts or Academic Records including Standardized Test Results
- Faculty evaluations, including courses taken and grades received
- Health & Personal Records (including immunizations and birth certificates)
- Attendance Records
- Clinical & Professional Records (including 504 or I.E.P. for this student) if applicable
- Results of achievement and aptitude tests

By signing below, I authorize the school listed above to release the requested records to Starboard Christian Academy, including records for my child that are confidential in nature pertaining to their academic and/or behavioral record.

Parent/Guardian Printed Name

Date

Parent/Guardian Signature

Please return all requested documents to:
Starboard Christian Academy
2380 Lake Shore Rd S
Denver, NC 28037
starboard@starboardchristian.com

www.starboardchristian.com