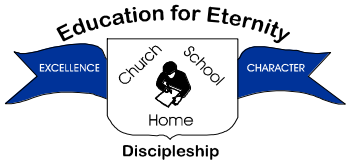


COPY OF TRANSCRIPT RELEASE FORM



Forcey Christian School

Parent or Guardian: Please complete this form and forward to the present or last school in which your child has been enrolled.

Present or last school: _____
(School Name)

_____ *(School Address)*

_____ *(City, State, and Zip code)*

Permission is hereby granted for a copy of transcript showing current Grades, IQ and Achievement Test scores, psychological evaluations (if any), health records and other pertinent information from the student's permanent record. For **Maryland public schools:** Also please include a copy of the individual results of the Maryland State Performance Assessment Profile. These are to be released to:

Forcey Christian School
Office of Admissions
2130 East Randolph Road
Silver Spring, MD 20904

Thank you for your cooperation and prompt assistance.

Date: _____

Student(s) Full Name _____

Present Grade: _____

Full Name of Parent(s) or Guardian(s): _____

Signature of Parent or Guardian: _____
