



## Transcript Release Consent Form

Parents: You may send this document to Heritage and we will request the records, or you may submit the form directly to your former school for faster processing.

Date: \_\_\_\_\_

I hereby give my consent for

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*Previous School Name*

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*Previous School Address*

To release to Heritage Classical Christian Academy, all records of my child(ren)

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*Child(s) Name(s)*

Including all grades, test scores, health records, behavior records, and any other pertinent information.

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*Parent/Guardian Signature*

*Date*

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**For School Registrar ONLY:** Please complete, sign, and return this form with the records.

*The Safe School Act of the State of Missouri requires that discipline records be included with other documents.*

Please indicate that these records/materials are enclosed:

- Any grades this student may have attained while in attendance at your school (If quarter or semester grades were not completed, please send grades at time of withdrawal)
- Immunization and screening records
- Standardized test scores
- Special education accommodations, Section 504 records, evaluations and/or IEP/IAP
- Educational/psychological evaluation reports
- Any other pertinent information/documentation
- Conduct/incident reports

Does this student have a discipline record? Please circle one: Yes No

Is this student presently suspended or expelled? Please circle one: Yes No

Suspended until \_\_\_\_\_ Expelled Date \_\_\_\_\_

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*Signature*

*Title*

*Date*