Prestonwood Christian Academy

6801 W. Park Blvd. | Plano, TX 75093 | Phone 972-930-4010 | Fax 972-930-4008 www.prestonwoodchristian.org

Student Record Release Authorization

Parents, please send to student's current school

Applicant's Name	LAST	FIRST	MIDDLE	PREFERRED NAME	
Current Grade	Grade Date of Birth				
Applicant's Current	School				
District					
School Address					
City, State, Zip					
Phone Number		F	ax Number		
In accordance with the provisions of the Family Educational Rights and Privacy Act of 1974, please send Prestonwood Christian Academy the following information on the above referenced student:					
Current and last to	wo years final repo	rt cards			
Health data					
Current and last to	wo years of standa	rdized test scores			
Unofficial Transcri	pt for students ent	ering Grades 8-12			
I give permission for the above records to be sent to Prestonwood Christian Academy.					
PARENT / GUARDIAN	'S PRINTED NAME				
PARENT / GUARDIAN'	S SIGNATURE		DATE		