

Salisbury Adventist School

305 Rudolph Road
Salisbury, NC 28146
Phone: 704.633.1282
Fax: 704.633.1282

Date: _____

Re: REQUEST FOR RELEASE OF SCHOOL RECORDS

To: RECORDS OFFICE

Student's name

Grade student last attended

Name of school from which student is transferring

Address of school from which student is transferring

Phone number of former school

Fax number of former school

Because the above named student has enrolled at Salisbury Adventist School, we request that all official school records be released to our office. We ask that you include grades, attendance, test scores, immunization records, and any other information that will assist us in meeting the academic and emotional needs of this student.

Principal's Signature

Parent's Signature