

PRINCE *of* PEACE

CHRISTIAN SCHOOL & EARLY LEARNING CENTER

TRANSCRIPT REQUEST FORM

*Parents/Guardians: Complete this form and submit to your child's current school.
Copies of records are required to complete application to Prince of Peace Christian School.*

I hereby request and authorize _____
Current School Name

to release all information requested regarding my child's academic and/or personal records for use with application for admission to Prince of Peace Christian School.

Student Name _____ Date of Birth _____ Current Grade _____

Parent Guardian Name

Parent Guardian Signature

Date

The transcript should include the following:

- Current report card/grade report
- Report card/grade report from previous school years
- Official transcript for grades 9-12
- Achievement test records and reports
- Diagnostic test records and reports
- Immunization records
- Attendance records
- Disciplinary records
- Withdrawal form with grades (if applicable)
- Any other information that may be pertinent to the educational needs of the student

Thank you for your response to this request. If you have any questions, please contact the Office of Admissions.

PLEASE SEND REQUESTED RECORDS VIA U.S. MAIL, FAX, OR EMAIL TO:

**Prince of Peace Christian School
Office of Admissions
4004 Midway Road
Carrollton, Texas 75007
Admissions@popcs.org
972-598-1102 FAX: 972-684-5768**