



Request for Transfer of Records Authorization

The King's Academy
471 Arnold Mill Road
Woodstock, GA 30188
admissions@thekingsacademy.org
Phone: (770) 592-KING Fax: (770) 592-5404

This form is provided for your convenience.
It is your responsibility to have your child's records transferred to The King's Academy.
Please fill out & submit to your child's LATEST SCHOOL for transfer of records.

Do not return this form to The King's Academy.

I, _____ (parent/guardian) hereby authorize:

Name last school attended: _____

Fax _____

To release all records, including academic, disciplinary, gifted, and special education/504 records
for: Student's Full Name: _____ Student's Current Grade Level: _____

Student's Date of Birth: _____

Signature of Parent Guardian _____ Date: _____

Please Send the Following Records to:

School: _The King's Academy _____

Mail: _471 Arnold Mill Road _____

_Woodstock, GA 301088 _____

Or

Email: _admissions@thekingsacademy.org _____

PLEASE INCLUDE

- Report Card
- Transcript
- Attendance
- Special Education/504
- Discipline Record
- Immunization Records
- Gifted Records
- Test Data

TO BE COMPLETED BY THE CURRENT SCHOOL

Has this student been suspended in the past? _____
If so, please attach a detailed discipline report with student records

Does this student have a 504, IEP or special education plan? _____
If so, please send these records to admissions@thekingsacademy.org

Completed By _____ Position _____