

Student's Name \_\_\_\_\_ Current Grade \_\_\_\_\_

School last attended \_\_\_\_\_ Phone \_\_\_\_\_ Records email address \_\_\_\_\_

Prior Schools (if applicable):

Elementary school, grades attended, contact phone/email \_\_\_\_\_

Middle school, grades attended, contact phone/email \_\_\_\_\_

High School, grades attended, contact phone/email \_\_\_\_\_

**PLEASE SCAN AND EMAIL THE FOLLOWING INFORMATION AS SOON AS POSSIBLE TO TSMITH@FACSMEMPHIS.ORG.**

- If transferring in the middle of school year, please provide current semester grades as of today
- Official High School transcript through last grade attended - Official transcript must include the grading scale (number/letter grade) and the GPA scale (weighted and unweighted)
- Copy of students report cards, elementary, middle and high school
- Standardized Test Scores
- Special Education documentation if applicable (IEP, SAP, psych evaluations, etc.)

**If you do not have complete records, please provide a written statement and the reason you are unable to provide documents.**

**First Assembly Christian School**

Attn: Records

8650 Walnut Grove Rd Cordova, TN 38018

Office (901) 531-7646 Fax (901) 324-3558

tsmith@facsmemphis.org

**AUTHORIZATION**

I, \_\_\_\_\_ hereby authorize the release of any official records, complete transcript of grades, test scores, and other teacher-referred information concerning the above-mentioned student's academic and behavioral performance.

I, \_\_\_\_\_ understand that records will not be released if I am under any financial obligation. If my records are unavailable, the enrollment will be delayed until the records are released.

DATE SENT

DATE RECEIVED

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date