



**Greater Fayetteville Adventist Academy**  
 2601 Lone Pine Drive  
 Fayetteville, NC 28306  
 910-484-6091  
 Secretary.gfaa@outlook.com



## REQUEST FOR STUDENT RECORDS

### TO THE APPLICANT'S PARENT/GUARDIAN

\_\_\_\_\_ requires official records from the  
 \_\_\_\_\_  
 (name of school)  
 applicant's current school in order to complete the application process.

I, \_\_\_\_\_, hereby give permission to the school secretary at  
 \_\_\_\_\_  
 (parent/legal guardian name)

Greater Fayetteville Adventist Academy who acts as the school registrar, to request school records for \_\_\_\_\_ to be sent to

\_\_\_\_\_ (Student Name)  
 2601 Lone Pine Dr., Fayetteville, NC 28306 where he/she has enrolled in grade \_\_\_\_\_.  
 \_\_\_\_\_ (grade)

These records are to include progress or grade reports, attendance records, health records, and all psychological and assessment records.

\_\_\_\_\_  
*Signature of Parent/Guardian*

\_\_\_\_\_  
*Date*

### TO THE APPLICANT'S CURRENT SCHOOL

\_\_\_\_\_  
 (Name of School)

\_\_\_\_\_  
 (Phone Number)

\_\_\_\_\_  
 (School FAX Number)

\_\_\_\_\_  
 (Street Address)

\_\_\_\_\_  
 (City)

\_\_\_\_\_  
 (State)

\_\_\_\_\_  
 (Zip Code)

The student named above has applied to Greater Fayetteville Adventist Academy. In order for us to complete enrollment, we request for the student's cumulative record to be sent.

Please include the following information:

1. All of the student's grade reports and official transcripts from your school plus any from other schools he/she has previously attended.
2. All Testing results. 3. All Health Records.
3. All Educational and Psychological Assessments, RTI Documentation, and IEPs or 504 plan, if applicable.
4. Attendance Records.
5. Behavioral Records.

\_\_\_\_\_  
*Signature of School Secretary/Treasurer or Principal*