

Laconia Christian Academy

1386 Meredith Center Rd. • Laconia, NH 03246 • (603) 524-3250 • Fax: (603) 524-3285



TRANSCRIPT RELEASE REQUEST

Parents or guardians of students in grades 1-12 should complete this form and give it to the school their student is currently attending or has most recently attended.

Name of applicant: _____ Applying for grade: ____ Date of birth: _____

Today's date: _____

The student noted above is applying for admission to Laconia Christian Academy.

I authorize _____

Name of school student is currently attending or has most recently attended

Mailing address of school

City/Town

State

Zip Code

Phone

Fax

to send or fax Laconia Christian Academy a copy of this student's:

- Transcripts/ Report cards (along with school grading key)
- I.E.P., if applicable

Signature of Parent/Guardian: _____ Date: _____

Print name: _____