

Records Release Authorization

RSCA Mailing Address: 219 Rock Springs Road, Milner, Georgia 30257

T. 678.692.0192 F. 678.692.0608

www.rsca.info

admissions@rsca.info

i (To be signed and submitted by parent/guardian or RSCA Authorized Personnel to the applicant's present school)

To: Principal or Guidance Counselor:

My child is an applicant for admission to Rock Springs Christian Academy. I hereby authorize you to release to Rock Springs Christian Academy the following records:

| | | | |
|------------------------|--------------------------|---------------------|--------------------------------|
| X All Academic Records | X Discipline | X Standardized Test | X Psychological |
| X Withdrawal Form | X Immunization | X CRCT Scores | X Current hearing and vision |
| X Report Card | X Eye/Ear/Dental Form | X SST Records | X Parent consent for placement |
| X Transcripts | X Birth Certificate | X 504 Records | X IEP (Special Education) |
| X Attendance | X Social Security Number | X Gifted | |

Name of Applicant: _____
Last First Middle

Date: _____ Current Grade Level: _____ Date of Birth: _____

Name of Current School: _____

School Phone: _____ School Fax: _____

Signature of Parent / Guardian or
RSCA Authorized Personnel

This information should be faxed to 678.692.0608 or emailed to admissions@rsca.info.

Large files may be mailed to:

Admissions
Rock Springs Christian Academy
219 Rock Springs Road
Milner, GA 30257



ROCK SPRINGS
— CHRISTIAN ACADEMY —

WHERE EXCELLENCE BECOMES A LIFESTYLE