



## *Truth Growth Impact*

To Whom It May Concern:

\_\_\_\_\_ has enrolled in grade \_\_\_\_\_ at  
Student's Name

Ambassador Christian Academy.

We would appreciate the student's cumulative records including the following:

- Transcripts
- Health Records
- Disciplinary/behavioral records
- Child Study Team/speech/language evaluations
- Any other information you may have to assist us in proper placement of this student

Thank you for your cooperation.

Sincerely,

Mrs. Sharon Civile  
Principal

### **Consent to Release Records**

I, \_\_\_\_\_ do hereby authorize any relevant institutions,  
Parent/Guardian  
doctors, or child study teams to release all evaluations and pertinent information  
concerning \_\_\_\_\_ to Ambassador Christian Academy.  
Student's Name

\_\_\_\_\_  
Name of previous school

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

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