



the King's School

"PREPARING TOMORROW'S LEADERS TODAY"

TRANSFER OF RECORDS RELEASE

RELEASING SCHOOL

RECEIVING SCHOOL

Date Requested: _____

The King's School

Attention: Rachel Cabrera

School District: _____

P.O. Box 300, Lake Luzerne, NY 12846

Office: (518) 654-6230 ~ Fax: (518) 654-7310

Attention: _____

E-mail: rcabrera@kingsschool.info

School: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Please be advised that my child has _____ applied _____ been accepted to The King's School.

I HEREBY AUTHORIZE THE FOLLOWING INFORMATION TO BE RELEASED.

All Academic, Health, and Attendance Records. Please include all Social, Psychological and Behavioral Reports.

If applicable, please include all Individualized Education Plans and Standardized Testing Results.

STUDENT INFORMATION:

NAME: Last, First, Middle

DOB:

CURRENT GRADE:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parent/Guardian Signature _____

School Official Signature _____

A Ministry of Church of the Nations

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