



## REQUEST FOR RELEASE OF RECORDS

TO:

\_\_\_\_\_  
(Name of School transferring from)

\_\_\_\_\_  
(School Address)

\_\_\_\_\_  
(City, State and Zip)

The student referred to below has applied for admission to Cornerstone Christian School. Please forward any school records such as attendance information, personal and family (statistical), Subject Performance Information, Standardized Test Information, School Enrollment Information, Physical Health Information and/or Inventory, Psychological Assessments, and in Virginia, Category 2 Confidential Information.

I hereby request that the principal of the above-named school, or his/her designee, forward the school records of my child to:

**Cornerstone Christian School**  
**Attention: Admissions Office**  
**197 Cornerstone Lane**  
**Rockingham, VA 22802**

\_\_\_\_\_  
(Student's Name)

\_\_\_\_\_  
(Student's Address)

\_\_\_\_\_  
(Student's City, State and Zip)

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
Date