



9801 Arlington Church Road * Mint Hill, NC 28227 * (704) 545-4589 * www.arlingtonacademy.org

TRANSCRIPT & RECORDS REQUEST FORM 2023/2024 SCHOOL YEAR

Name of Former School: _____

Address of School: _____

City: _____ State: _____ Zip: _____

Principal: _____

School Phone: _____ School Fax #: _____

To whom it may concern:

My child has enrolled in Arlington Christian Academy. Please forward to Arlington Christian Academy a complete academic file, final transcript, disciplinary file, health records, and any special psychological testing pertaining to:

Student's Name: _____

Date of Birth: _____ 22-23 Grade Level: _____

Thank you so much for your prompt attention to the above request.

Date

Parent's Signature

Date

Arlington Christian Academy Admissions

The ACA Admissions Office will request records for all accepted students after the completion of the current school year. If a student transfers to ACA during the school year, records will be requested immediately upon acceptance.