



Hilton Head Christian Academy

Attention: Laurie White
3088 Bluffton Parkway
Bluffton, SC 29910
lwhite@hhca.org

Student Record Release

Student Name: _____ Current Grade: _____
Date of birth: _____ has applied to Hilton Head Christian
Academy for the _____ school year.
Name of current school _____

My child is applying for admission at Hilton Head Christian Academy. I hereby consent for the following information to be released.

PLEASE SEND COPIES OF THE FOLLOWING INFORMATION:

- Current transcript, including grading scale
- Report card(s)
- Birth certificate
- Standardized test scores
- Attendance records
- Discipline records
- IEP (if applicable)

*Any information necessary for placement.

Name of Parent (print)

Parent signature

Date