



# Cape Henry COLLEGIATE

1320 Mill Dam Road | Virginia Beach, Virginia 23454-2306 | 757.481.2446 | CapeHenryCollegiate.org  
An Independent College-Preparatory School | Prekindergarten - Grade 12

## TRANSCRIPT AND RECORDS REQUEST

To be completed by the Applicant's Parent or Legal Guardian

Complete the top section of this form and submit it to your child's current school to request records be sent to our Admissions Office.

\_\_\_\_\_ is applying for admission to Cape Henry Collegiate.

STUDENT

I, \_\_\_\_\_, authorize \_\_\_\_\_

PARENT/LEGAL GUARDIAN

CURRENT SCHOOL

to release the information listed below to Cape Henry Collegiate.

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_

## INFORMATION REQUEST

Please send copies of the following information to Cape Henry Collegiate, Attn: Admissions, 1320 Mill Dam Road, Virginia Beach, VA 23454 or email copies to [admissions@capehenry.org](mailto:admissions@capehenry.org).

- Academic Transcript (including grades and comments from all previous years and the current school year)
- Standardized Test Results
- Attendance Records
- Discipline Records
- Any Psychological Testing and Behavioral Records
- Documentation of Special Services (Speech, Counseling, Occupational Therapy, IEP, 504 Plan, etc.)

Has the student ever been suspended or expelled from your school?  Yes  No

IF YES, PLEASE EXPLAIN

Has this student's school attendance been seriously affected by physical/emotional problems, outside activities, or other situations?  Yes  No

IF YES, PLEASE EXPLAIN

Is this student eligible to return to your school?  Yes  No

IF NO, PLEASE EXPLAIN

Signature of School Official: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

STREET ADDRESS

CITY

STATE

ZIP

TO BE COMPLETED BY THE SCHOOL OFFICIAL