



RECORDS REQUEST

TO: _____

DATE REQUESTED: _____

FROM: Faith Community Academy - Attn: Stephanie Lewis
2551 W. Orange Grove Rd.
Tucson, AZ 85741

Phone: 520-742-4189

Fax: 520-297-2073

Email: fca@fcatuson.org

The student(s) named below recently enrolled or are being considered for enrollment at Faith Community Academy. Please forward the last two years of transcripts via fax, email, or USPS. In accordance with PL 39-380, Sec. 438, permission to release this information has been granted by the parent/guardian. Thank you in advance for your time and attention to this matter.

WE REQUEST:

- Report Cards
- Health Immunization Record
- Attendance Record
- Achievement Scores
- IEP (if applicable)

Student Name _____ DOB _____ Grade _____

Student Name _____ DOB _____ Grade _____

Student Name _____ DOB _____ Grade _____

Parent/Guardian Signature _____ Date _____