



academy

RECORDS RELEASE FORM

Please complete this form and submit it to your child's current school.

Student Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_
Last First Middle

The student indicated above is seeking admission to MCA Academy. Entering grade: \_\_\_\_\_

MCA Academy is requesting the following records:

- Academic Records: Complete transcripts reflecting a minimum of one school year. Please include any mid-term progress reports or report cards if the academic school year is currently in session and a complete transcript is therefore not available.
Standardized Test Scores: Please send scores for all years available.
Discipline Records or Reports.

School Releasing Records:

Table with 4 columns: Name, Phone Number, Address, City, State, Zip Code

Hand-delivered materials will not be considered. Please retain a copy of this form for your records and return the original with the requested items directly to:

MCA Academy
Admissions
2911 Grand Avenue
Suite 500
Miami, FL 33133

By signing below I hereby grant permission for the release of the above records. I agree to waive my right of access to any of the items requested above, to my child's teacher(s) and principal/counselor recommendations or to any other confidential materials used for the admission process.

Parent/Guardian Name (please print): \_\_\_\_\_

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