



Divine Savior Academy

A Christian Academy Dedicated to Excellence

TRANSCRIPT REQUEST

10311 NW 58th St. :: Doral, FL 33178 :: 305-597-4545 :: fax 305-597-4077 :: www.divinesavioracademy.com

Date: _____

To: _____
(Name of School)

Address: _____

Please fill out the Divine Savior Academy Parental Release of Records below:

As parent/guardian of _____ Date of Birth _____

I hereby give permission for the immediate release of the following records:

- Academic
- Attendance
- Conduct
- Medical
- Psychological
- Social

Signature of Parent or Guardian: _____ Dated: _____

Please forward records to:

Mrs. Juanita Wells
Director of Admissions
Divine Savior Academy
10311 NW 58th St.
Doral, FL 33178

I understand that this information will be used in the best interest of the above named person, with due respect to confidentiality.