



**Windsor Christian Academy**  
**P.O. Box 596**  
**Uwchland, PA 19480**  
**Tel: 610-458-7177**  
**Fax: 610-458-2569**

**To officials at applicant's current school:**

Please send a copy of all records pertaining to the applicant, \_\_\_\_\_ . This would include final grades for last year, any grades for this year, most recent standardized test scores, and any other information you feel would be helpful in our evaluation. The applicant's parent/s or guardians have signed a release form, below.

Please send all information to Windsor Christian Academy at your earliest convenience. Thank you for your assistance. If you have any questions, please call Debra Wagner (610-458-7177).

**To the parent/s or guardians:**

Please complete this form and give it to the principal of your child's current school.

Name of student \_\_\_\_\_

Present school \_\_\_\_\_

This student has applied for admission to Windsor Christian Academy to enter \_\_\_\_\_ grade for the term beginning \_\_\_\_\_ (month/year). I request that a transcript of grades, standardized tests scores and referral forms for my child be submitted to Windsor Christian Academy.

Signed \_\_\_\_\_

Date \_\_\_\_\_