



TRANSCRIPT FORM

To Whom It May Concern:

_____ has enrolled at Somerset Bible Baptist Christian Academy. Please forward a complete transcript, health and immunization records, attendance records, standardized test scores, and any other information which might be of help to us. The parents have indicated their approval for these records to be released to our school by their signature below. Thank you for your prompt response.

Sincerely,

A handwritten signature in cursive script, appearing to read "Bryan E. Miller".

Bryan E. Miller, Pastor
Administrator

Please release my child's records to:
Somerset Bible Baptist Christian Academy
42 Cedar Grove Lane
Somerset, NJ 08873

Print Name: _____

Signature: _____ Date: _____



TRANSCRIPT FORM

Please provide previous school information.

Name of School

Address

City

State

Zip

Phone

Parent, please return this form to SBBCA to be forwarded to the previous school.