

*Christ Care Unit Christian School
Sicklerville, New Jersey*

To Whom It May Concern:

_____ has enrolled in Christ Care Unit
Christian School. Please forward the following records in reference to the above-
named individual to:

P.O. Box 346
Sicklerville, NJ 08081

Cumulative Records:

- Transcripts
- Health records
- Disciplinary records
- IEP
- Most recent standardized tests results
- Other information that would assist in placement of this student

Sincerely,

Christ Care Unit Christian School

CONSENT TO RELEASE RECORDS

I, _____ authorize all relevant institutions, doctors, and
(parent/guardian)

education professionals to release all information/evaluations concerning

_____ to Christ Care Unit Christian School.
(student's name)

(signature)

(date)

Name and Address of previous school:
