

**Record Request**

Date \_\_\_\_\_

Attention Student Records:

The following student(s) have enrolled in Fayetteville Street Christian School.

<u>STUDENT</u>	<u>GRADE</u>
_____	_____
_____	_____
_____	_____
_____	_____

Please forward to us any records that you may have on file for the above student(s), including grades, standardized test scores, attendance and health records, birth certificate.

Mrs. Julie Moss  
Administrative Assistant

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Previous School Information

To: \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_