



MARINERS CHRISTIAN SCHOOL REQUEST FOR TRANSCRIPT

~ To the Parent ~

Please complete and sign this section of the form and return it to Mariners Christian School.

Student's Name: _____ **Current Grade:** _____

Name and Address of previous/current school:

Parent Authorization:

You are hereby authorized to release any and all information from my child's educational records and/or regarding my account status, which are requested by Mariners Christian School.

Parent Signature Date

~ To the School ~

The student named above is a candidate for admission to Mariners Christian School. Please forward all records, a report of courses, grades, and results of the standardized achievement and individual intelligence tests, including first semester grades for the current year. For grades 7 and 8, please include math level. More specifically, has the student taken Algebra? This information is essential to our decision-making process.

The student named above has been accepted to our school. Please forward all records to the below listed address as soon as possible. Thank you.

Thank you for your cooperation. If you have any questions, please contact Sherry Fenley at 714.437.1700 ext. 146.

Please forward the requested information to:

Sherry Fenley
Mariners Christian School
300 Fischer Avenue
Costa Mesa, CA 92626