



NEW HOPE
ACADEMY

Request for School Records

Name and address of school attended:

City _____ Zip _____

County _____

Please send all school records for the following student(s) currently enrolled in New Hope Academy. We need all cumulative records, testing, immunization cards, and any other pertinent information so that we can assess student ability and grade placement. Please include any other information that will verify subject content and proof of educational goals being met for grades given.

FULL NAME

BIRTH DATE

GRADE

Parent Signature _____

Signature of Administrator _____

Date _____

Please send records to: **New Hope Academy**
301 Water St.
Prattville, AL 36067