



# NORTHSIDE CHRISTIAN ACADEMY

## Records Release Form

Check one:

\_\_\_ Currently enrolled at Northside - Current grade level: \_\_\_\_\_

\_\_\_ Alumni of Northside Christian Academy- Year of graduation: \_\_\_\_\_

\_\_\_ No longer enrolled at Northside- Last year attended: \_\_\_\_\_

I authorize Northside to send a copy of \_\_\_\_\_'s  
First Middle Last (maiden, if married)

transcript, standardized test scores, and pertinent records to the school/organization listed below.

Student or Alumni Date of Birth: \_\_\_/\_\_\_/\_\_\_ Current Phone Number: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_  
Parent or Alumni Name (Print)

\_\_\_\_\_  
Signature (Required)

Please send records to the following (school name & address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fax your completed form to (704) 921-1384, email to [transcripts@northsidecharlotte.com](mailto:transcripts@northsidecharlotte.com) or mail to:  
Northside Christian Academy - Attn: C-Wing Office - 333 Jeremiah Blvd. - Charlotte, NC 28262

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Internal Use Only:

Date Request Received: \_\_\_\_\_

Business Office Approval: \_\_\_\_\_

Date Records Sent: \_\_\_\_\_

Records Sent By: \_\_\_\_\_