



Portland Christian School

Quality Christian Education Since 1924

8509 Westport Rd • Louisville, KY 40242 • (502) 429-3727 • Fax (502) 326-2682

Website: www.portlandchristian.org

Records Request

Please release:

1. Birth certificate
2. Immunization certificate and Medical forms
3. Transcripts and/or academic standing and credits
4. Psychological evaluation report, if available
5. Individual standardized achievement test results

To: Portland Christian School
8509 Westport Road
Louisville, KY 40242
Attention: Admissions

Fax: 502-326-2682
Email: susan.brangers@portlandchristian.org

For the following student:

Full Legal Name of Student	Birth Date	Grade
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School Last Attended	Phone Number
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Street Address	Fax Number
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City	State	Zip
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Parent/Guardian Signature	Date
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NOTE TO PARENTS/GUARDIAN: It is very important to have the COMPLETE ADDRESS of the school last attended. Portland Christian School will take responsibility for requesting records.

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Official use only:

Date request received: _____

Date request mailed/faxed: _____

Date transcripts received: _____

Transcripts: Complete _____ Incomplete _____

Comments: