

**PERMISSION TO RELEASE COPY OF RECORDS
FROM *CURRENT* SCHOOL**

Name of Student _____ Current Grade: _____

The above student has applied for admission at Jackson Academy.



Established 1959

**Admissions Office
Jackson Academy
P. O. Box 14978
Jackson, Mississippi 39236-4978**

I request that a **copy** of the official record of my child's current grades and transcript, in addition to any standardized test scores, be forwarded to the Jackson Academy Admissions Office.

Parent's Signature

Date

TO PRINCIPAL/DEAN OR GUIDANCE COUNSELOR:

SCHOOL RECORDS: Please attach to this form a record of current and previous year's grades, and any standardized test scores for achievement and ability. Include materials from previous school(s) when appropriate. Please mail these forms directly to Jackson Academy's Admissions Office. Thank you for your prompt response.