



# Gateway Christian Academy

*“A Ministry of Gateway Church”*

*Certified and Accredited by: ILCS/FLOCS*

Bishop Dr. Preston Williams II, Senior Pastor

## Request for Confidential Records

**Parent/Guardian:** Please complete the authorization below and return to the admissions office.

### Authorization of Release for Educational Records

|                             |               |       |          |
|-----------------------------|---------------|-------|----------|
| Student's Name              | Date of Birth | Grade |          |
| Most Recent School Attended | Telephone     | Fax   |          |
| Street Address              | City          | State | Zip Code |

In accordance with the federal regulations regarding the privacy rights of parents and students under the Family Educational and Privacy Act of 1974, the undersigned hereby consents release to Gateway Christian Academy of all educational records (including statement of disciplinary action or disciplinary records) and other information as may be requested for the above-named student. I understand that this form is confidential and hereby waive any rights to review its contents. I also release, discharge and agree to indemnify and hold harmless Gateway Christian Academy, its administrators and all employees of any and all claims, actions or liability arising out of or relating to the submission of the information requested.

Date

Parent/Guardian's Signature

### To the Registrar, Principal or Guidance Counselor:

We would appreciate you promptly sending the following documents to the address below:

- Complete transcript and most recent report card
- Standardized test results
- Any special testing results or placement in special program
- All disciplinary records or official statement of disciplinary action

Please mail or fax to: **Gateway Christian Academy**  
Attn: Admissions

1-30-22

2130 N.W. 26<sup>th</sup> Street • Fort Lauderdale, Florida 33311

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