



Collegedale Academy

PO Box 628—4855 College Drive, East
Collegedale, Tennessee 37315-0628

Transcript Request

To: _____

Re: _____

Current Grade: _____

Date of Birth: _____

We would appreciate your sending us the records indicated below:

- _____ Official Transcript of grades
- _____ Grades at time of withdrawal
- _____ Health Records, Physical Examination Record and
Current Immunization Record
- _____ Accumulative Record
- _____ Test Scores
- _____ Proficiency Test Scores (for Tennessee Schools)
- _____ Other _____

Send to: Registrar
Collegedale Academy
PO Box 628
Collegedale TN 37315-0628

(Registrar/Counselor)

Date of Request: _____

(Parent Signature)

Remarks: _____
