



Valley Adventist Christian School

1275 Helena Flats Road, Kalispell, MT 59901 (406) 752-0830

REQUEST FOR TRANSFER OF EDUCATIONAL RECORDS

TO: Valley Adventist Christian School

1275 Helena flats Road

Kalispell, Montana 59901

FROM: School _____

Street _____

City _____ State _____ Zip _____

RE: Student _____

Address _____

Birth date _____ Grade _____

School Official _____

As the parent/guardian of the above named student, I hereby grant my permission for the release of my child's educational records to Valley Adventist Christian School. I acknowledge notification of this transfer of records, and I understand that the information transferred will be treated in a confidential manner and will not be transmitted to a third party without my consent.

Signature of Parent/Guardian _____

Date _____ Current Address _____
