



REQUEST FOR ACADEMIC RECORDS (including IEP/Service Plan, Psychological and Health Records)

Ozark Catholic Academy P.O. Box 1240, Tontitown, AR 72770 • 479.316.3445 • www.ozarkcatholic.org

PARENTS

Please complete the top section and turn in the form to the school office, registrar or guidance office at your student's current school. The school will submit the completed form and additional documents to Ozark Catholic Academy.

Student's Name _____ Date _____

Current School _____ Current Grade _____

Parent's Signature _____

Registrar

The above student has applied for admission to Ozark Catholic Academy. We would appreciate you supplying the information requested below. All information will remain confidential. The forms of students not admitted to Ozark Catholic Academy will be destroyed. Please sign at the bottom of form to complete the request.

I. ATTENDANCE

Current Year (TO DATE)

Prior Year

Days Absent _____

Days Tardy _____

II. ACADEMIC RECORDS

A. Please submit the **unofficial academic records** or **report cards** for the students from grade **6, 7** and **first quarter of grade 8**.

B. Please submit copies of student's IEP/Service Plan or Behavioral Plan.

___ (Initial here) Student did **NOT** have an IEP/Service Plan or Behavioral Plan while attending this school.

III. STANDARDIZED TESTSCORES

Please enclose a copy of the most recent standardized test results.

Signature (PERSON COMPLETING FORM)

Date

Position

School Office/Registrar, please return to:
Ozark Catholic Academy, P.O. Box 1240, Tontitown, AR 72770
or email to admissionsoca@ozarkcatholic.org