



REQUEST FOR ACADEMIC RECORDS (including IEP, 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 application.

I. ATTENDANCE

Current Year (TO DATE)

Prior Year

Days Absent _____

Days Tardy _____

II. ACADEMIC RECORDS

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

III. ACADEMIC STANDING

1. How many students are in the candidate's current grade in you school? _____

2. In which quarter of these students does the candidate rank? (CIRCLE ONE)

Top Quarter

Second Quarter

Third Quarter

Bottom Quarter

IV. STANDARDIZED TEST SCORES

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