



Transcript Release Form

Applicant Name: _____

Birthdate: _____

To the Parent: Please complete and sign this section of the form and send to your child's current school. An official report/transcript is required to complete the application file. Please request that the school return this form directly to Quest Academy Admission Office in a timely manner. (In some cases it may be necessary to send an additional copy of this form to a previous school if your student has recently attended multiple schools.)

For the student named above, I authorize the release of a copy of official school records. I understand that these materials will become part of the permanent file if the student is admitted to Quest Academy. We appreciate a quick response to this request.

School Name: _____

Address: _____

Phone: _____ Fax: _____

Signature of Parent or Guardian: _____

To the School: A school transcript copy (report cards, narratives, standardized test scores, and IQ test) for the above named student is needed to complete the application file. All information will remain confidential. A quick response is appreciated.

Please forward information by mail, email or fax to:

Admission Office
Quest Academy
500 North Benton
Palatine, IL 60067

847.202.8035

FAX: 847.202.8035

Email: admission@QuestAcademy.org