



Plumstead Christian School

P.O. Box 216, 5765 Old Easton Road
Plumsteadville, PA 18949

TRANSFER NOTIFICATION FORM

(Complete and send to your FORMER SCHOOL)

Grade: _____

Name of Student: _____

Current School: _____

This is official notification of your transfer to:

(New School Assignment)

Effective: _____

The parents or legal guardian of the above named student have applied to Plumstead Christian School for admission. Please send us the following school records:

1. Academic achievement from previous grades
2. Results of standardized testing
3. Attendance and health records
4. Psychological evaluations

This will authorize you to release any and all school records to Plumstead Christian School. Thank you for your cooperation.

Signature of Parent/Legal Guardian

Date of Request

