

Transcript Release Form

I hereby give permission for my son's / daughter's transcript of academic work undertaken at Decatur Heritage Christian Academy to be sent to colleges, universities, or scholarship programs to which he/she is applying. It is the student's responsibility to notify the counseling office of those colleges and programs for which a transcript is needed and to do so at least two (2) weeks before the due date at the college, university, or scholarship program.

Student name:

Parent / guardian name: _____

Parent / guardian signature: _____

Date: _____