

PARENTS: Please complete this form and send it directly to your child's present school.

SCHOOL: Please send transcript at the end of the first semester.

I have made application for my child, _____, to attend Charlotte Latin School in grade _____ beginning in the Fall of _____. I give permission for you to send Charlotte Latin School the following information concerning my child:

The Official School Transcript that includes:

1. Standardized Tests (Intelligence, Aptitude, Achievement)
2. Academic Performance (Classroom grades or evaluation)
3. Birth Certificate

Date _____

Signature _____

Relationship to child _____

REGISTRAR: Please send this student's records to the address below at the end of the first semester but no later than February 15, 2010.

Admissions Office, Charlotte Latin School
9502 Providence Road, Charlotte, North Carolina 28277
Telephone / 704.846.7207 Facsimile / 704.847.8776