



## Request for Academic Transcript

*Please complete and submit this form to the applicant's current school.*

Date: \_\_\_\_\_

Current School: \_\_\_\_\_

Current School Address: \_\_\_\_\_

The following students have **applied** to attend Bethany Christian Schools for the \_\_\_\_\_ school year. *Note that the students have not yet been accepted or enrolled—they are beginning the admissions process.* **Please forward to the school address below a copy of their academic transcript including ISTEP scores and behavior plans/records as relevant.**

Student Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name (written): \_\_\_\_\_

Bethany Christian Schools  
2904 South Main Street  
Goshen, IN 46526-5499

Phone: 574 534-2567

Fax: 574 533-0150

If you have questions, contact Vanessa Adcock Admissions Director, at Bethany Christian Schools: phone 574 534-2567 or email [vadcock@bethanycs.net](mailto:vadcock@bethanycs.net)