



Release of Academic and Discipline Records and Recommendation Form

Permission is hereby granted to:

Previous School Name: _____

Address: _____

Student: _____ Grade: ____ DOB: _____

The above named student has applied at King Abdullah Academy.

Please release the following records:

- Complete transcripts of students' records
- Grades in progress at time of leaving
- Health Records
- Results of achievements and intelligence tests
- Personality rating and other similar data
- Discipline records

Written information is to be sent to the attention of:

Admissions Coordinator-**Soudad Albermani**- Phone/Fax:(571)-351-5551

Email: **Admissions@kaa-herndon.com**

King Abdullah Academy
2949 Education Drive, Herndon Virginia 20171
www.kaa-herndon.com

Authorization to release student's records to King Abdullah Academy

Parent (Guardian) Name: _____

Signature of Parent or Guardian _____ Date _____

1 copy of this release is to be forwarded with the records.
1 copy is to be maintained in the student's file.