



Augusta Christian Schools

Building Kingdom Leaders

313 Baston Road, Martinez, Georgia 30907
Phone (706) 863-2905 Fax (706) 860-6618

TRANSCRIPT REQUEST FORM

Student Name: _____ Request Date: _____

Date of Birth: _____ Other name used for records (maiden, etc.) _____

Current ACS student? YES NO

Did you graduate from Augusta Christian? YES NO Graduation year: _____

Phone number(s): work: () _____ home: () _____ cell: () _____

I hereby release my high school transcript. SIGNATURE: _____

Please send a copy of my high school transcripts and test scores to the school(s)/organizations listed below:

1) School Name: _____

City, State: _____

2) School Name: _____

City, State: _____

Deadline for postmark, if any: _____

Will you pick up the transcript from the Guidance Counselor instead of it being mailed out? YES NO

Please include any special instructions:

“Train up a child in the way he should go, and when he is old he will not depart from it.” Proverbs 22:6

ACSI and SACS Accredited ♦ SCISA Member