



RECORDS RELEASE FORM

140 Galley Hill Road, Cuddebackville, NY 12729, USA
Tel: (845) 672-0550 — Fax: (845) 977-0481
Email: admissions-and-records@feitian.edu

ATTENTION APPLICANTS: Please fill in the information below and submit it to your current or last attended school. Do NOT return this form to Fei Tian College.

Applicant's Official Name: _____
LAST FIRST MIDDLE

Date of Birth: ____ / ____ / ____ Gender: Male Female Grade: _____

I request and authorize the proper authorities at...

NAME OF APPLICANT'S CURRENT SCHOOL _____ Dates of Attendance: ____ / ____ / ____
FROM (MM/YY) TO (MM/YY)
SCHOOL STREET ADDRESS & CITY/TOWN _____ SCHOOL PHONE NUMBER _____
STATE/PROVINCE & POSTAL CODE _____ COUNTRY _____

to release a copy of the following parts of my record to Fei Tian College, at which admission is being considered.

Checklist:

- Transcript of grades, tests, and attendance records
- Verification of last grade attended
- Verification of birth date/birth certificate
- Health records/immunization records
- Special education records (IEPC, diagnostic reports, etc.)
- Record of extracurricular activities

Name Of Applicant **X** Applicant's Signature Date: _____
(MM/DD/YYYY)

Name Of Parent/Guardian **X** Parent's/Guardian's Signature Date: _____
(Required if applicant is under 18 years) (MM/DD/YYYY)

CURRENT SCHOOL OFFICIALS

Records should be forwarded to: By mail: Fei Tian College By fax: (845) 977-0481
Office of Admissions and Records For any inquires:
140 Galley Hill Rd. telephone: (845) 627-0550
Cuddebackville, NY 12729, USA