

# Request Form

To be used with future written requests

## Family Christian Academy East

ARK Center/Knoxville  
124 E. Inskip Dr. • Knoxville, TN 37912 • Fax(865) 689-1213

New Address

Date of Request \_\_\_\_\_

Student's Full Legal Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_ Student ID# \_\_\_\_\_

**For Transcripts:** Name of College \_\_\_\_\_ College Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

### I. Transcript of Grades: (9-12 only)

First certified copy to parents and to college: FREE\* (12th grade only)

Each additional certified copy: \$9.00

Not enrolled: \$17.00

Please attach note with college name, address and contact name

Qty.

Subtotal

1

\$ 0

\$

\$

### II. SF1010 Form – Driver's License/Permit Form

A copy of the student's birth certificate must be attached.

Student must be at least 15 years old.

First copy: FREE

2nd copy: \$9.00

Race \_\_\_\_\_

(Note: Expires 30 days from date issued. Must be enrolled 60 days.)

1

\$ 0

\$

### III. Copy of Attendance and Progress Reports

Year: \_\_\_\_\_ 1st quarter \_\_\_\_\_ 1st semi-annual \_\_\_\_\_

2nd quarter \_\_\_\_\_ 2nd semi-annual \_\_\_\_\_

3rd quarter \_\_\_\_\_

4th quarter \_\_\_\_\_

First copy of each student progress and attendance reports: \$4.00

Each additional copy: \$.50

\$

\$

### IV. Copy of School Records

Copies of school records: \$0.50 per page. Not to exceed: \_\_\_\_\_ pgs.

V. Other GED \_\_\_\_\_ Work Letter \_\_\_\_\_ Soc Sec \_\_\_\_\_ Enroll Letter \_\_\_\_\_ SAT/ACT(\$3.00 ea) \_\_\_\_\_

\$

\$

### VI. Teacher Cards

Lost Teacher/Student Card: \$9.00

\$

Request fulfilled 7 to 10 days from date of receipt

(Please do not inquire prior to 10 days)

\*Please mark bottom left corner of envelope "REQUEST"

**Total:** \$ \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_