



Summer 2019

Dear New Pope Francis Global Academy Parent or Guardian,

Thank you again for enrolling your child at Pope Francis Global Academy. We are thrilled and honored that you have chosen to join our school community and we look forward to getting to know you all over the coming months.

In order to for your child's transfer to be complete, Pope Francis Global Academy must attain transcripts from your child's current/exiting school. Please print out and complete the enclosed [Request for Records Form](#) and submit it to your child's exiting school right away. This form gives them permission to send copies of your child's complete school record (academic, health, and disciplinary) directly to us by mail at Pope Francis Global Academy. At the same time you may want to request a copy of all of the same information for yourself to keep on file at home.

Please call or email me with any questions about this request.

Thank you so much.

Jodi Thyen  
Director of Admissions and Advancement



\_\_\_\_\_  
Date

Sending School:  
\_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

### REQUEST FOR RECORDS

Because federal law requires that written permission of the parent or guardian be obtained for the transfer of academic, health, disciplinary and all other records held by the previous school of attendance, the request for the transfer of all such records to Pope Francis Global Academy is stated below.

I \_\_\_\_\_ (Parent name) hereby authorize \_\_\_\_\_  
(School name) to transfer copies of all student records, as well as any special education information pertaining to  
\_\_\_\_\_ (Student's name) to Pope Francis Global Academy. Please send all records to the  
above address indicated below (check one):

\_\_\_\_\_ Pope Francis Global Academy  
North Campus  
6040 West Ardmore Avenue  
Chicago, IL 60646  
773.763.7080

\_\_\_\_\_ Pope Francis Global Academy  
South Campus  
6143 West Irving Park  
Chicago, IL 60634  
773.736.8806

Thank you,

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Date