



COMMUNITY CHRISTIAN SCHOOL

PO Box 780 • 1719 S Mt Olive St • Siloam Springs, AR 72761
(479) 549-4141

EMAIL: info@ccs-siloam.com • WEBSITE: www.ccs-kings.com

Student Records Release

Date _____

To Releasing School:

School Name

Address

City

State

Zip Code

My child(ren) has (have) been withdrawn from your school. Please release all pertinent academic and health records to Community Christian School, Siloam Springs, Arkansas. Amy Hodge, Principal, will act as primary contact person for CCS. Thank you.

Student Name(s)

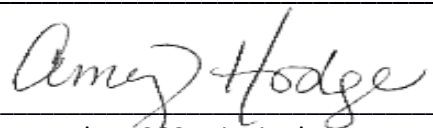
(last name first)

Age

Grade Level

(at time of withdrawal)

Signature of Requesting Parent/Guardian



Amy Hodge, CCS Principal