

Mount Airy Christian Academy

Request for Information to Support an Application



Student's Name _____

School/Scholarship/Program _____

Attention _____

Deadline for this Application _____

Is this application to be received by or postmarked by this deadline?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this for a binding Early Decision Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this for an Early Action Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No

The Application

- Was or will be submitted (electronically or online or in paper vision –I will send or have sent by myself).
- Is attached to this form with all necessary Application Fees and address

Request for School Records

I will need:

- An official MACA Transcript to be sent to the following address: _____

- A Mid-Year Report (February) to be sent to the following address: _____

- An unsealed/unofficial MACA Transcript to be handled by myself
- A copy of transcripts from other schools attended before MACA that are in MACA files
 - I will handle these transcript copies by myself
 - I wish for these transcript copies to be sent to the following address: _____

Request for Teacher/Staff Recommendations

I have asked the following teacher(s), pastor, administrator, or counselor for a recommendation: _____

- I have given them an addressed envelope or
- I would like the recommendations sent to the following addresses:

1. _____

2. _____

3. _____

Other Requests:

My signature authorizes Mount Airy Christian Academy (MACA) to send to the above-named school, scholarship program, or other program an official copy of my MACA transcript, and if applicable, photocopies of my transcripts from other the other high schools I have attended as well as the other information I have indicated above. It also authorizes MACA to send reports or transcripts, showing the grades I have earned in the first and second semesters of my senior year. Recommendations are also considered confidential documents. Unofficial and unsealed transcripts for your personal records can be provided per your request.

- I have made and saved a copy of the application form and all attachments.
- I want the above records sent to the designated school/scholarship program.
- I will pick up the requested documents.

Student's Signature _____ **Date** _____

Parent's Signature _____ **Date** _____

(Required if student is under 18)

IMPORTANT: IT IS THE STUDENT'S RESPONSIBILITY TO MAKE COPIES OF APPLICATIONS AND TO ORDER OFFICIAL SAT/ACT SCORES DIRECTLY FROM THE TESTING AGENCY IF THE COLLEGE REQUIRES IT.