

DayStar Adventist Academy

HC 64 Box 2201 Castle Valley, Utah 84532

Fax: 435-259-5209 Ph: 435-259-7719 Email: askus@daystaradventistacademy.org



Transcript Release Form

To:

In accordance with Federal Law and Utah Law a request is made that all students

records including behavior/disciplinary records of: _____

be forwarded to:

Registrar

DayStar Adventist Academy

HC 64 Box 2201

Castle Valley, Utah 84532

Fax: 435-259-5109

Email: askus@daystaradventistacademy.org

I consent to the transfer of these records and are aware of our right to examine them if

we so desire.

Signature of Parent/Guardian (or student 18 yrs of age) Date: _____

Signature of Parent/Guardian (or student 18 yrs of age)