



American Spirit *academy*

EL Christian Studies
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AUTHORIZATION TO RELEASE REFERENCE INFORMATION

I/We have made application for our child/children to attend the ASA EL Christian Studies. I/We authorize EL Christian Studies to inquire about my/our child's/children's attitudes, work ethic, academic status, and conduct and to verify all data given in my/our application for admission, related papers, and oral interview.

I/We authorize the release and giving of any information requested by EL Christian Studies such as grade reports, conduct and attitude reports, and personal references favorable or unfavorable to my/our child/children.

I/We release any person, organization, or company from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to my/our child/children.

I/We further certify that I/We have carefully read and do understand the above statements.

Applicant's Mother's signature

Applicant's Father's signature

Date