

Giant Campus Academy



Giant Campus
Academy™

Student Records-Change of Information Form

NAME CHANGES REQUIRE: One piece of valid photo ID with current name AND a copy of an official govt. name change document.

VALID PHOTO IDENTIFICATION: Passport, state driver's license/ ID, military ID

Return this form via link below or fax to:
866-436-0244

Student Information (Previous)

Full Name

E-mail Address

Date of Birth

Address

Phone Number

Student Information (New)

Full Name

E-mail Address

Date of Birth

Address

Phone Number

Signature (if under 18, please include a parent/guardian signature)

I understand that a student's education records are confidential and may only be disclosed as allowed by the Family Educational Rights and Privacy Act of 1974, or with the written permission of the student's parent or legal guardian, or of the student (if over 18 or attending a postsecondary school). Only the student (if 18 or older) and or the parent/guardian can release the records to a 3rd party.

Authorized Person Receiving Records (Print Name)

Date

Authorized Signature

Parent/Guardian (Print Name)

Date

Parent/Guardian Signature

GCA OFFICE USE ONLY

Received By:

Date

Updated
Student SIS?