



CENTRAL JERSEY COLLEGE PREP

CHARTER SCHOOL

Release of Records

To: (Name of Previous School)

Address:

Street:

City:

State:

School Phone: (____) _____ School Fax : (____) _____

Central Jersey College Prep has enrolled _____
for the 2024-2025 academic year. Please accept this document as formal approval for
the release of all official school records, including:

- Official transcripts(or report card)
- Testing information
- Attendance and discipline records
- Special Education Information (IEP)*****
- Original transfer card
- Original health and immunization records
- Guidance records/Information

Parent/Guardian Signature:

Date:

Please forward all records to:

Central Jersey College Prep Charter School
101 Mettlers Road
Somerset, NJ 08873

ATTN: Student Records (CJCP-NB)