



## CONFIDENTIAL ADMINISTRATOR REPORT

Name of student \_\_\_\_\_ Applying for grade \_\_\_\_\_

To the Principal or Counselor:

Please send the following information to Hawaii Baptist Academy:

1. Teacher Reference Report (to be completed by the teacher)
2. Standard Test Results
3. Transcript (grades 9-12)
4. Report Cards (previous year and 1st semester of current year)
5. Please add below any personal comments and impressions which might help us know the child better.

School \_\_\_\_\_

Date \_\_\_\_\_

Your Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Position \_\_\_\_\_

MAIL THIS FORM DIRECTLY TO:

### Grades 2-6

Director of Admissions  
Hawaii Baptist Academy  
21 Bates Street  
Honolulu, HI 96817  
Ph: (808) 536-6830 or 524-5477  
Fax: (808) 524-8193

### Grades 7-12

Director of Admissions  
Hawaii Baptist Academy  
2429 Pali Highway  
Honolulu, HI 96817  
Ph: (808) 595-7585 or 595-6301  
Fax: (808) 564-0332