



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