



TRANSCRIPT REQUEST FORM

This form must be signed and payment attached before a transcript can be issued. Allow a minimum of ten days for processing.

Complete all seven items and return to the address above. Please print legibly.

1. Name \_\_\_\_\_  
Last First Middle  
Name While Attending \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Daytime Telephone Number ( ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

2. Address \_\_\_\_\_  
Number & Street  
City \_\_\_\_\_ State/Zip Code \_\_\_\_\_

3. Indicate approximate dates of attendance.  
First Year Enrolled \_\_\_\_\_ Last Year Enrolled \_\_\_\_\_

4. Number of official (School Seal) transcripts to be mailed to each address below.  
*(A transcript request will not be processed for a student who is indebted to the School.)*  
Send transcript to the address below: (Official transcripts are \$5.00 each)  
1) # of Copies \_\_\_\_\_ 2) # of Copies \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Deadline: \_\_\_\_\_ Deadline: \_\_\_\_\_

5. (Check One)  
 Mail in 48 hours - RUSH Transcript - \$10.00 each  
 Regular Transcript Processing - \$5.00 each  
 Send after current grades received.  
 Fax unofficial Copy. Fax # is \_\_\_\_\_

6. Method of Payment: Cash ( ) Check ( ) Money Order ( )  
American Express ( ) VISA ( ) MasterCard ( ) Diner's Club ( )  
Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
  
# of Official Copies: \_\_\_\_\_ times \$ 5.00 = \_\_\_\_\_  
# of Official Rush Copies: \_\_\_\_\_ times \$10.00 = \_\_\_\_\_  
# of Unofficial Copies: \_\_\_\_\_ times \$ 5.00 = \_\_\_\_\_  
Total Due = \_\_\_\_\_

7. \_\_\_\_\_ Date of Request \_\_\_\_\_

SIGNATURE (MANDATORY for release of trascript)

The Family Rights and Privacy Act as amended in 1995 prohibits release of this information without the student's written consent.