

TRANSCRIPT REQUEST - Students (2020/2021)

I request that my transcript be sent to:

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Name of college/university (or other) to send transcript

\_\_\_\_\_  
Address of college/university

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Date or Month/Year of Graduation

\_\_\_\_\_  
*Signature of Student*

\_\_\_\_\_  
Printed name of Student

**\*\*\* Parents must put their request for class rank information in writing to Dr. Granger's office. (Must include the name and address of the college where the transcript should be sent).**