



# Transcript Request Form

1.

**Student Information**  
(please print)

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_ **Grade:** \_\_\_\_\_  
(only if no longer attending)

2.

**Applicant Information**  
(please print)

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

3.

**Applicant's Relationship to Student**

I am (check one):

- The person named (as indicated in item 1) and that I am at least 18 years of age.
- The parent or legal guardian of the person named in item 1.
- A party entitled to receive the record(s) as a result of a court order (Court order # \_\_\_\_\_ State \_\_\_\_\_).
- A member of a law enforcement or government agency, as provided by law, who is conducting official business.
- An attorney representing the person named in item 1 or a person or agency empowered by statute or appointed by a court to act on behalf of the person named in item 1.

4.

**Applicant's Statement Under Penalty of Perjury**

I, \_\_\_\_\_, swear under penalty of perjury under the laws of the State of California, that I am a person authorized (as indicated in item 3) to receive a copy of the student transcripts.

Executed (signed) on (date) \_\_\_\_\_ at (City and State) \_\_\_\_\_

(Signature) \_\_\_\_\_ (Witness) \_\_\_\_\_

5.

**Transcript Request**

Type requested:  Unofficial Copy  Official Copy  Sealed Official Copy\*      Number requested:

Transcript Mailing Address (if applicable): \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\*Please fill-in Transcript Mailing Address