



UNIVERSITY PREP

TRANSCRIPT REQUEST FORM (former non-graduate students only)

In order to release a student transcript, it is University Prep policy to have appropriate permission on file. Please complete this form, and return it to our registrar by drop-off, postal mail, email or fax at 206.525.9659.

Student _____ Home Phone _____

Address _____

City _____ State _____ Zip _____

DOB _____ Current Grade Level _____ High School Graduation Year _____

For students under 18 years of age, parent or guardian signature is required:

I hereby give permission for my daughter's/son's transcript to be released.

Parent/Guardian Signature _____ Date _____ Phone _____

For students 18 years of age or older:

I hereby give permission for my transcript to be released.

Signature _____ Date _____ Phone _____

Requesting: Quantity _____ Official Transcript(s) – signed and sealed envelope

Quantity _____ Unofficial Transcript(s) – unsigned and unsealed envelope

Transcript(s) should be released in the following manner (check one):

_____ Held in University Prep's main office for pickup

_____ Mailed to home address above, or fax: Attn _____ Fax # _____

_____ Mailed to a third party (list all names/addresses below), or

fax: Attn _____ Fax # _____

Please use additional space on back for additional institution(s) mailing address