

Transcript Requests

NAME _____

MAIDEN NAME (if applicable) _____

YEAR OF GRADUATION _____

DATE OF BIRTH _____

PHONE NUMBER WHERE YOU CAN BE REACHED _____

WOULD YOU LIKE YOUR TRANSCRIPT:

MAILED? TO: _____

FAXED?: TO: _____

FAX NUMBER: _____

OR ARE YOU PICKING IT UP? _____

Please call ahead to make sure it is ready.

You may mail, fax, phone or email (fankhas@minerva.sparcc.org) this information to
Mrs. Fankhauser in the Guidance Office.

Please allow 3 business days for processing, keeping in mind mailing time.

Please note that the Guidance Office is closed during summer break.