

Transcript Request Form

Transcripts will be processed within 48 hours of request. If you need additional transcripts, please fill out another form. Do not write on the reverse side. There is a \$3 fee for anyone requesting a transcript after one year of graduation or departure from Universal School.

Please print the following information.

1. Name _____

2. Date _____

3. Social Security Number _____

4. Address _____
Street City State Zip Code

5. Date of Birth _____ Date of Entrance into Universal School _____
M/D/Y M/Y

6. Will you be picking up the transcript? Yes No

7. Does the school need to mail your transcript? Yes No

8. If you answered "yes" to number 7, please provide the name and address of the institution to which your transcript should be mailed:

Direct Transcript to the Attention of: _____

Name of Institution _____

Address _____
Street City State Zip Code

9. Do you need a transcript emailed elsewhere? Yes No

Direct Transcript to the Attention of: _____

Name of Institution _____

Address _____
Street City State Zip Code

For Office Use Only

Fee _____

Paid _____