

Kent-Meridian High School Transcript & Diploma Reprint Order Form

_____ , _____
 Last Name (in school record) First Name Middle Initial Date of Birth

Daytime Phone Number: _____ Date of Order _____

NOTE: All orders can be picked up in the Grad Center. If you would like us to mail or fax your order, please provide complete address or fax number below.

Current Enrolled Student: ID# _____

- | | | |
|---|----------------|-----------|
| <input type="checkbox"/> Unofficial Transcript | Quantity _____ | No Charge |
| <input type="checkbox"/> Official Transcript | Quantity _____ | No Charge |
| <input type="checkbox"/> Official Transcript & School Profile | Quantity _____ | No Charge |

Former Student: Grad Year _____ Withdrawal Year _____

- | | | |
|---|----------------|--------|
| <input type="checkbox"/> Official Transcript | Quantity _____ | \$5.00 |
| <input type="checkbox"/> Official Transcript & School Profile | Quantity _____ | \$5.00 |
| <input type="checkbox"/> Unofficial Transcript: | Quantity _____ | \$2.00 |
| <input type="checkbox"/> Diploma Reprint: | Quantity _____ | \$5.00 |

Please mail or fax transcripts/diploma to: (NOTE: - COMPLETE ADDRESS or FAX NUMBER REQUIRED)

*Every effort will be made to process your request as soon as possible, it may take up to 5 business days.
 *Transcripts/diplomas are not released if outstanding fines exist.
 *Transcripts/diplomas not picked up within 90 days will be destroyed. No refunds. Please reorder & current fees apply.

-----For Office Use-----

ID Verified YES Initials _____

Fines YES NO Cashier Library Tech Initials _____

Paid Receipt # _____ Initials _____

Completed Date _____ Initials _____