EMERSON HIGH SCHOOL TRANSCRIPT REQUEST

To request your high school transcript, please complete this form. **There is a \$5.00 charge per transcript ordered.** The request form can be mailed with the amount due, faxed (faxed requests won't be mailed until payment is received), scanned and emailed, or brought in to the main office. Unpaid fees and fines must be paid before a transcript will be given. It is the student's responsibility to request, pick up, and/or mail transcripts in time to meet college deadlines.

| Mail request to: | Emerson High School 10903 NE 53 rd Street | | |
|---|---|--------------------|--------------------------|
| Phone: | Kirkland, WA 98033 425-936-2300 | | |
| Fax request to: | 425-576-0567 | | |
| Email request to: | Sally Jenkins, sjenkins@ | lwsd.org or Mary (| Osness, mosness@lwsd.org |
| | | | |
| Today's Date | | | |
| Name when enrolled at BEST/Emerson | | | |
| Birthdate | | Graduated? | yes no |
| Month/Year you left BEST/Emerson Phone number: | | | |
| | | | |
| Number of Official/Sealed Transcripts Requested Unofficial/Unsealed Transcripts | | | |
| There is a \$5.00 charge per transcript ordered. | | | |
| | | | |
| | | | |
| Address where transcript is to be sent once payment is received: (Please print) | | | |
| Student or Institution Name | | | |
| | | | Apt.# |
| | | | |
| | | State | |
| Phone Number | | | |
| FOR OFFICE USE ONLY: Date | request received at Emerson | Received by | Date Mailed |