

YOU MUST INCLUDE A COPY OF YOUR PICTURE ID WITH THIS REQUEST – DRIVER'S LICENSE, MILITARY ID, STUDENT ID, ETC.

Colorado Springs School District #11, Personnel Support Services/Records Management Center
Mr. Michael Gaal, Superintendent

Request for Student Transcript or Other Student Records

Date: _____

Student's Name _____

Last First MI Maiden

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Date of Birth _____

Graduated From _____ Year of Graduation _____

School

If you didn't graduate, last year attended a D11 School _____

Year School Grade

Official Transcript _____ (College, Employment, Etc.)

Unofficial Transcript _____ (Personal Use) (NO CHARGE FOR UNOFFICIAL)

Mail To (MAILING ADDRESS OR EMAIL ADDRESS):

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Special Instructions:

A \$10.00 processing fee is due and payable to School District #11 (NO CHARGE FOR UNOFFICIAL TRANSCRIPTS). You may pay by check or money order (made out to District 11), cash, or debit or credit card. If mailing, faxing, or emailing your request, please send a copy of your picture ID with the request form. If faxing, or emailing, you may pay by debit or credit, or send a check, money order, or cash to us separately indicating that your request was faxed or emailed. Please allow 24-48 hours to process this request. Thank You! (Please note that a \$2.50 processing fee is added to all debit and credit card payments).

Phone: 719-520-2079 Fax: 719-520-2423 Email: d11records@d11.org

Type of credit or debit card: _____

Card #: _____

Expiration Date: _____

3 Digit Security Code on back of card: _____

Billing address if different than address above:

Signature

Please mail request to:

Colorado Springs School District #11
Attn: Records Management Center
870 Babcock Road
Colorado Springs, Colorado 80915