



TRANSCRIPT REQUEST FORM

To request a transcript, please complete this form and submit in person or via email (charteroffice@ousd.org).

Student Name:	
Date of Birth:	
School Attended:	
Current Phone or Email:	

Please select your preferred delivery method in the table below. Please indicate the number of copies requested (if applicable) and provide the corresponding delivery information.

Delivery Method	# of Copies Requested	Delivery Information
<input type="checkbox"/> Mail		Mailing Address (include addressee name or organization):
<input type="checkbox"/> Email	N/A	Email Address:
<input type="checkbox"/> Pick Up In Person*		Date/time that you would like to pick up the transcript copy in person:

Student Signature:

Date: