

## ALUMNI TRANSCRIPT REQUEST FORM

### Please PRINT CLEARLY

(\*You can also e-mail the following information to [Cynthia.Boudreau@stpsb.org](mailto:Cynthia.Boudreau@stpsb.org) **OR** [Deborah.Pfeifer@stpsb.org](mailto:Deborah.Pfeifer@stpsb.org))

Current Name: \_\_\_\_\_

Last Name (if different when attending Salmen): \_\_\_\_\_

Phone #: \_\_\_\_\_

Current Address: (include city/state/zip) \_\_\_\_\_

\_\_\_\_\_

Year of Graduation: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security #: XXX-XX-\_\_\_\_\_

\_\_\_\_\_ - I will pick up the transcript from Salmen (Hours: M-F 7:00 a.m. to 3:00 p.m.)

\*Summer hours vary – please call 985-643-7359

**Location to send Transcript: (Please print CLEARLY)**

Fax Number: \_\_\_\_\_

Name of College (or other location you want them sent): \_\_\_\_\_

\_\_\_\_\_

Complete Mailing Address/City/State/Zip Code:

\_\_\_\_\_

\_\_\_\_\_

A copy of your proof of identity (i.e. driver's license) **MUST accompany** your request. This may be emailed, faxed or mailed to Salmen's office.

We realize the importance of processing your request as soon as possible. Normal processing time is approximately 48 hours

**QUESTIONS, please contact** Cindy Boudreau – Salmen Registrar at 985-643-7359 Ext. 2302

Or via e-mail at: [Cynthia.Boudreau@stpsb.org](mailto:Cynthia.Boudreau@stpsb.org) **OR** [Deborah.Pfeifer@stpsb.org](mailto:Deborah.Pfeifer@stpsb.org)

Main Office Fax #: 985-645-8776

Salmen High School, 300 Spartan Dr. Slidell, LA 70458

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