



**TRANSCRIPT REQUEST FORM BY MAIL**



Piper High School  
8000 NW 44<sup>th</sup> Street  
Sunrise, FL 33351

TODAY'S DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

STUDENT NUMBER: \_\_\_\_\_ GRADUATION YEAR: \_\_\_\_\_

DATE of BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

\*\*\*\*\*PLEASE ALLOW 3-4 DAYS FOR PROCESSING\*\*\*\*\*

\$2.00 fee for each PRINTED Hard Copy Transcript to be PICKED UP.

\$3.00 fee for each PRINTED Hard Copy Transcript to be MAILED.

**EXACT CHANGE WHEN ORDERING TRANSCRIPTS**

Request by Mail: Picture ID and cash or money order in the amount of your order must be included with your request. Attention: Transcripts

\_\_\_\_ I would like to pick-up my official transcripts, # of copies \_\_\_\_ (x \$2.00) = \$\_\_\_\_\_

\_\_\_\_ I would like my official transcripts mailed, # of copies \_\_\_\_ (x \$3.00) = \$\_\_\_\_\_

If you would like your transcript sent to a college, please fill out information below.

1.) College Name: \_\_\_\_\_

College Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

2.) College Name: \_\_\_\_\_

College Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_