

Transcript Request Form

TO THE PARENT / GUARDIAN

Please complete the following information before giving it to your child's school administrator. Provide the administrator a list of schools and email addresses to which to send your child's transcript or instructions for how to upload your child's transcript to each school's online application system.

Name of Applicant:	
Birthdate of Applicant:	Applicant forGrade in Fall 2026 Current Grade:
Address of Applicant:	
Name of Current School:	Phone:
Address of Current School:	
For the student named above, I authorize the re evaluations for the 2023-24, 2024-25, and 2025	elease of school records, including an official transcript of all grades and -26 academic years.
Parent/Guardian Authorization Signature	Date
TO THE SCHOOL ADMINISTRATOR	
common mission, assisting families in their exp	Insortium — https://losangelesindependentschools.org/schools/ — shares a loration of independent school education. They do so by following the best indent Schools (NAIS); by establishing and adhering to ethical, consistent policies on decision notification and response dates.
2023-24, 2024-25, and 2025-26 academic year grades to us as soon as they are available, ide	d, including an official transcript of all grades and evaluations at your school for the s. Please be sure to include grades to date in current courses or forward first term ally no later than January 9 , 2026 . To protect the integrity of these official school different file name before submitting to schools.
Has this student ever been subject to any serio	us disciplinary action, suspension, or expulsion from school? □ No □ Yes
If yes, please explain:	
School Official's Name and Title	
Email address	Phone number
Signature	Today's date