THE GOVERNOR'S SCHOOL FOR THEARTS

CHAIR

GOVERNOR'S SCHOOL FOR THE ARTS

TRANSCRIPT REQUEST FORM

DATE OF REQUEST:

*PLEASE NOTE IT WILL TAKE 3 WORKING
DAYS FROM THE DATE THIS FORM IS
DELIVERED TO THE OFFICE TO PROCESS
ALL REQUESTS.

NAME	NAME: DEPARTM		:	
NUME	BER OF TRANSCRIPTS NE	EEDED:		
CHEC	K ONE:			
<u> </u>		NSCRIPT(S) IN THE GSA MAIN OFFICE		
		PT(S) THROUGH MY DEPARTMENT CHAIR		
	MAIL MY TRANSCRIPT	S)*		
			OFFICE USE DNLY:	
*	PLEASE PROVIDE AN ADDRESSED AND STAMPED ENVELOPE FOR EACH INSTITUTION. OTHERWISE, TRANSCRIPTS WILL BE SEALED AND RETURNED TO YOU THROUGH YOUR DEPARTMENT		REC'D;	
	CHAIR		Com'o:	
	•			
S	THE FOVERNOR'S CHOOL OR THE Arts	TRANSCRIPT REQUEST FORM		
		*PLEASE NOTE IT WILL TAKE 3 WORKING		
,		DAYS FROM THE DATE THIS FORM IS		
		DELIVERED TO THE OFFICE TO PROCESS ALL REQUESTS.		
NAME: DEPARTMENT:			NT:	
NHIK	ABER OF TRANSCRIPTS	NEEDED.		
14:01	MOER OF TRANSBRIFTS	NEEDED:		
CHE	CK ONE:			
	I WILL PICK UP MY TRANSCRIPT(S) IN THE GSA MAIN OFFICE			
	RETURN MY TRANSCI	RETURN MY TRANSCRIPT(S) THROUGH MY DEPARTMENT CHAIR		
	MAIL MY TRANSCRIPT(S)*			
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*	'	ADDRESSED AND STAMPED ENVELOPE FOR OTHERWISE, TRANSCRIPTS WILL BE	OFFICE USE ONLY: REC'D:	

SEALED AND RETURNED TO YOU THROUGH YOUR DEPARTMENT

COM'D: