**CROSS RIVER ACADEMY**

**P. O. BOX 1412**

**ALABASTER, AL 35007**

**(205) 685-5988**

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| **TRANSCRIPT REQUEST FORM**  Please allow four weeks for preparation of transcripts, not including mailing.  There will be a $20.00 fee for less than two weeks notice. | |
| Request Date: | Requesting: MAIL PERSONAL RECORDS |
| Date Needed: | Reason: MOVING TRANSFERRING |
| Student Name: | Current Grade: |
| Parent’s Name: |  |
| Daytime Phone: | Email: |
|  |  |
| Request Transcripts be sent to: |  |
| (1) | (2) |
|  |  |
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When submitting a Transcript Request Form:

1. Report Cards & Fees **must** be up to date for a current transcript.
2. Attendance records must be current.
3. **Please include $5.00 per copy requested.**
4. Fill out the Transcript Request Form, giving this office 4 weeks notice.
5. Copy the completed Transcript Request Form for your records.
6. Mail the original Transcript Request Form to this office at:

**CROSS RIVER ACADEMY**

**P. O. Box 1412**

**Alabaster, AL 35007 or fax to 205-621-0600**

1. **If this is a “rush” request (less than two weeks notice), please include $20.00.**
2. ONLY **ONE (1)** Transcript is included with the diploma. If additional transcripts are needed, they must be requested using this form.

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**Parent Signature Date**

|  |  |
| --- | --- |
| **Office Use Only:** |  |
| Date Rec’d: Date Sent: | Prepared by: |