



MANOR ISD REQUEST FOR OFFICIAL/UNOFFICIAL STUDENT TRANSCRIPT

PLEASE PRINT.

ALL SECTIONS MUST BE COMPLETED IN ORDER FOR THIS REQUEST TO BE PROCESSED.

PLEASE ALLOW UP TO 5 BUSINESS DAYS FOR THE COMPLETION OF THIS REQUEST.

INCOMPLETE OR ILLEGIBLE REQUESTS WILL NOT BE PROCESSED.

FULL NAME USED WHILE ATTENDING MANOR ISD: _____

DATE OF BIRTH: _____ STUDENT ID#: _____

CONTACT PHONE NUMBER: (_____) _____

EMAIL ADDRESS: _____

CURRENT STUDENT: ___YES ___NO IF YES, CURRENT GRADE LEVEL IS _____

IF NO, YEAR OF GRADUATION OR WITHDRAWAL: _____ CAMPUS ATTENDED: _____

TYPE OF TRANSCRIPT REQUESTED AND NUMBER:

___OFFICIAL ___UNOFFICIAL _____ NUMBER REQUESTED**

INCLUDE TEST SCORES? ___YES ___NO

****TRANSCRIPT FEES:**

*For current students, the first 5 official transcripts per year (August-July) are free. Additional copies are \$3 each and payment must be made at the time of request, cash or money orders made out to the campus only.

*For former students, transcripts are \$3 each and payment must be made at the time of request, cash or money orders made out to the campus only.

TRANSCRIPT DELIVERY INFORMATION:

___ I WILL PICK UP THE TRANSCRIPTS. (PLEASE NOTE THAT COPIES PICKED UP BY A STUDENT MAY NOT BE ACCEPTED AS OFFICIAL COPIES BY ALL INSTITUTIONS.)

___ SEND ONE TRANSCRIPT TO EACH OF THE FOLLOWING: If you are requesting more than 2 transcripts to be sent, please write additional requests on the back of this sheet. Transcripts will be sent electronically if the receiving entity accepts TREx.

*FULL NAME OF COLLEGE/UNIVERSITY/COMPANY/PERSON: _____

FULL MAILING ADDRESS: _____

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FULL MAILING ADDRESS: _____

The Family Educational Rights and Privacy Act (FERPA) is a federal law that gives parents the right to have access to their children's education records, the right to seek to have the records amended, and the right to have some control over the disclosure of personally identifiable information from the education records. When the student turns 18 years old, or enters a postsecondary institution at any age, the rights under FERPA transfer from the parents to the student. For more information, visit the Family Policy Compliance Office at <http://www2.ed.gov/policy/gen/guid/fpco/index.html>.

PRINTED NAME OF REQUESTOR: _____

SIGNATURE OF REQUESTOR: _____ DATE: _____

OFFICE USE ONLY: DATE RECEIVED: _____ RECEIVED BY: _____

AMOUNT PAID: \$_____ DATE PAID: _____ HOW PAID: _____

COMPLETED BY: _____ DATE COMPLETED: _____

DATE TRANSCRIPT INFORMATION POSTED IN SKYWARD: _____ DELIVERY METHOD: PICK UP MAILED TREx

SIGNATURE OF STUDENT AT TIME OF PICK UP: _____ DATE: _____