

CROSSROADS CHRISTIAN SCHOOLS OFFICIAL TRANSCRIPT REQUEST FORM

Student Services
2380 Fullerton Avenue, Corona, CA 92881 Phone #: 951-520-3091
www.crossroadsschool.org
Email Completed form to Registrar@crossroadsschool.org

PLEASE NOTE:

\$5.00 charge for each set of transcripts

Mail to: 2380 Fullerton Avenue, Corona, CA 92881

- **Valid Picture ID required**
- We do not have copies of Diplomas
- Transcripts will be ready within 5 business days.
- If student is 18 years or older, they must request their own records

Name _____

Name while in school (if different) _____

Date of Birth _____ Phone Number: _____ Present

Address: _____

City State Zip

Email: _____

PLEASE CHOOSE ONE OF THE FOLLOWING:

GRADUATE
(Received High School Diploma)

Year of Graduation _____

NON-GRADUATE
(Attended CCHS, but not enough credits for a diploma)

Last Year attended _____

I WISH TO ORDER:

OFFICIAL TRANSCRIPT
(Sealed and Embossed - **DO NOT OPEN**)

How many copies? _____

UNOFFICIAL TRANSCRIPT
(For your records - You may open)

How many copies? _____

DO YOU WISH TO:

Pick up records? <input type="checkbox"/> YES <input type="checkbox"/> NO Authorize someone else to pick up records? Please provide complete name: _____	Have us mail them? <input type="checkbox"/> YES <input type="checkbox"/> NO Name _____ Address _____ City, State, ZIP _____
FAX records? ? <input type="checkbox"/> YES <input type="checkbox"/> NO	FAX Number / Name: _____

Signature of Student or Guardian

Today's Date

Office Use Only: Paid: <input type="checkbox"/> YES <input type="checkbox"/> NO	Completed On: _____ By: _____
--	---

ID Verified by: _____