

## REQUEST FOR OFFICIAL TRANSCRIPT

This form should be used to request a copy of your training transcript. Failure to provide all required information may delay the processing of your request.

**Student's Name and Address\***

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- ← Mail \_\_\_ transcript(s) to my address.
- ← Email \_\_\_ transcript(s) to my address.
- ← Mail \_\_\_ transcript(s) to 3<sup>rd</sup> party.
- HOLD for Pick Up

### INFORMATION ABOUT PROCESSING YOUR TRANSCRIPT

- Transcripts are released only when accompanied by a **SIGNED** request form from the student.
- Your accounts with Skybridge **MUST** be current or your transcript will be **WITHHELD**.
- Allow **SEVEN** working days for processing. Requests will be honored as quickly as possible in the order of receipt.
- During peak periods there will be some delay in excess of seven days but not to exceed 14 days.
- All your work at Skybridge is considered one transcript. **There is no fee for transcript unless requesting SAME DAY SERVICE which is \$10.00** fee payable by cash or charge only.

### INFORMATION NEEDED TO EFFICIENTLY PROCESS YOUR TRANSCRIPT

**DATES/Courses ATTENDED:**

\_\_\_\_\_

**SPECIFY ALL CEU(s) seeking or earned:** \_\_\_\_\_

**PHONE NUMBER\*:** \_\_\_\_\_

**E-MAIL ADDRESS\*** (Please add us to your list of safe senders & plan to confirm receipt):

\_\_\_\_\_

**MAIDEN NAME** (if applicable): \_\_\_\_\_

**SIGNATURE\*:** \_\_\_\_\_

**Third Party Mailing Address:**

\_\_\_\_\_

### *Office Use Only*

Date Sent: \_\_\_\_\_

Amount Received: \$ \_\_\_\_\_