



Brandon School Division

Request for Transcript of Academic Records

- A Transcript of Academic Records will only be released upon completion and return of this form.
- As this information is personal to the applicant, it can only be released to the applicant, mailed to the applicant's address and/or released to a person as directed by the applicant.
- This office will also provide a copy of the Transcript directly to an educational institution, a place of prospective employment or any other place as specified below.
- Due to anticipated demand for Transcripts, please allow up to two weeks for processing of request.

Current Name: _____
Last First Middle

Full Name(s) used while attending school: _____

Current Address: _____
Street No. and Name

City Province Postal Code

Date of Birth _____
year/month/day

Phone Number: _____ **Email Address:** _____

List of schools attended during the last two years in school:

Name of School	Grade	Year	Complete/Incomplete
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Last Grade Completed: _____ **Exact Year of Final Attendance:** _____

Provide the COMPLETE name and address if you wish a copy of your transcript to be forwarded somewhere other than your current mailing address above:

Date

Signature of Above-Named Student OR Signature of Parent/Legal Guardian if student is under 18 years of age

Accepting the Challenge