



TRANSCRIPT REQUEST FORM

To request a transcript, please complete this form and submit in person or via email (charteroffice@ousd.org).

Student Name:	
Date of Birth:	
School Attended:	
Current Phone or Email:	

Please select your preferred delivery method in the table below. Please indicate the number of copies requested (if applicable) and provide the corresponding delivery information.

Delivery Method	# of Copies Requested	Delivery Information
<input type="checkbox"/> Mail		Mailing Address (include addressee name or organization):
<input type="checkbox"/> Email	N/A	Email Address:
<input type="checkbox"/> Pick Up In Person*		Date/time that you would like to pick up the transcript copy in person:

* The OUSD Office of Charter Schools (located at 1000 Broadway, Suite 300 in Oakland) is generally open to the public M-F 9:30am-4:30pm. If you are coming to pick up a transcript in person, please email or call in advance to ensure that someone will be available to receive you. You may access our parking garage from Franklin & 11th and validation may be available upon request.

Student Signature: _____ **Date:** _____