



Bethel Christian School

Transcript Request Form

Revised 02/21/11

Registrar
cgonda@bethelchristian.net
(661) 943-2224 x5041

- Please complete ALL information on the transcript request form.
- **There is a \$3 fee per transcript ordered.** (No charge for transcripts needed for scholarship applications)
- Submit one request for each transcript requested. **Requestor is responsible for the correct address.**
- Allow 7-10 days for processing.
- Requests being held for current semester grades will be mailed approximately three to four weeks after the end of the semester.
- Student records are confidential. Transcripts will be issued only at the *written* request of the student or parent if the student is under 18. *Students over 18 must sign the request form themselves.*
- Transcripts will not be issued until all outstanding debts with the school are settled.

Name While Attending Bethel: _____

Current Name (if different): _____

Date of Birth: _____

Parents Names: _____

Current Address: _____

City, State, Zip: _____

Home phone: _____ Day phone: _____

E-mail address: _____

Year last attended: _____ Grade last attended: _____

Graduate of Bethel Christian School? Y N Last enrolled in the Homeschool program

I wish to order an: Official Transcript (This document may only be opened by the organization it is intended for. Official transcripts will no longer be identified as official if they are copied.)

Unofficial Transcript

To be picked up Mail To: _____

Send immediately _____

Hold for semester grades _____

Signature: _____ Date: _____

 (For Office Use Only) Received By: _____ Date: _____ Amount Received: _____ Receipt / Check # _____
 Upon receipt of payment, submit to **Accounts Payable**. Account Clear? Y / N Initials: _____ Date: _____ Note: _____
 Fax to **Registrar** upon account clearance. Date Sent/Called: _____ Initials: _____ Note: _____