HAPPY ACADEMY
6-12 Private School

Sangeetha Padman Principal

Transcript Request Form

Student Name: _____ **Grade:** _____

　　　　　　　Last　　　　　　　　　　　　　　First　　　　　　Middle

Gender: _____   Date of Birth: _____ Dates Attending Happy Academy: _____

Send Transcript to the following school(s):

School Name: _____ School Phone:_____

School Address: _____

City: _____ State: _____ Zip: _____ Due Date: _____

School Preferred Delivery Method:　　　　Postal mail　　Common App　　Upload　　Fax　　Other

School Name: _____ School Phone:_____

School Address: _____

City: _____ State: _____ Zip: _____ Due Date: _____

School Preferred Delivery Method:　　　　Postal mail　　Common App　　Upload　　Fax　　Other

USE BACK SIDE OF FORM FOR MORE SCHOOLS

Copy requested by Parent/Guardian or adult student named below:

Name: _____ Phone:_____

Address: _____

City: _____ State: _____ Zip: _____

Transcripts are an official document that Happy Academy prepares for transferring credit to the college you will be attending. The service we provide when evaluating the credit you may be transferring into Happy Academy is for that purpose only. Official transcripts are to be requested in writing and will be sent from Happy Academy directly to the indicated institution/school. Student's account must be in good standing as well as all related contractual obligations before any transcripts will be released. In the event of suspected dishonesty on the part of student or parent, transcripts will be held until after the next scheduled meeting of the Board of Directors.

Parent/ Guardian Signature: _____ Date: _____

Parent/Guardian Identification:

Name: _____   Relationship: _____

Evidence of Relationship: (if not listed on original enrolment contract)

_____

_____

ADDITIONAL SCHOOLS

School Name: _____ School Phone:_____

School Address: _____

City: _____ State: _____ Zip: _____ Due Date: _____

School Preferred Delivery Method: Postal mail   Common App   Upload   Fax   Other

School Name: _____ School Phone:_____

School Address: _____

City: _____ State: _____ Zip: _____ Due Date: _____

School Preferred Delivery Method: Postal mail   Common App   Upload   Fax   Other

School Name: _____ School Phone:_____

School Address: _____

City: _____ State: _____ Zip: _____ Due Date: _____

School Preferred Delivery Method: Postal mail   Common App   Upload   Fax   Other

School Name: _____ School Phone:_____

School Address: _____

City: _____ State: _____ Zip: _____ Due Date: _____

School Preferred Delivery Method: Postal mail   Common App   Upload   Fax   Other