



Transcript Request Form

To request student records, please complete the following form and return it to your student's Learning Coach for processing.

I am requesting records for _____ . Date of Birth: _____

I am the: student (must be 18 or older) parent/guardian: _____

- Please send:
- Full academic transcript
 - Progress report for current school year
 - Report card for _____
 - Other: _____

Send records to:

Institution Name: _____

Person of Contact: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Mailing Address: _____

Preferred Method of Sending: Email Fax Mail

I hereby grant EdisonLearning permission to release the above mentioned student records to the institution listed on this form. I certify that I am said student and/or the parent or legal guardian of said student and have the legal right to make such a request.

Signature of student and/or parent or legal guardian: _____

Print Name: _____ Date: _____