



Request for Release of Student Transcript

Independent School District 624
(White Bear Lake Area Schools)
4855 Bloom Avenue
White Bear Lake, MN 55110
(651) 407-7556

Please print.

Note: Students currently enrolled in I.S.D. #624 may get a copy of their transcript directly from the guidance office at their school.

Today's Date: _____

Full Name (Name under which you attended school)

Date of Birth

Year Graduated/Withdrawn

CERTIFIED COPY - Name and address of the college, university, employer, etc., to which you would like a certified copy sent: *(A certified copy is an official copy with the district's embossed seal).*

Authorized Person or Agency/College/Scholarship Program, etc.

Address

City/State/Zip

STUDENT COPY - Indicate your address below to obtain a *student copy* of your transcript: *(Student copies are often not accepted by colleges, universities, military, employers, scholarship committees, etc. They are generally for your information only.)*

Name

Address

City/State/Zip

Signature (Required)

Daytime Telephone Number () _____

NOTE: There is a \$3 processing fee per request. Make checks payable to I.S.D. 624. Request form and payment should be sent to: I.S.D. 624, Attn: Transcript Processing, 4855 Bloom Ave, White Bear Lake, MN 55110.

For office use only:
Fee paid by _____ Check _____ Cash
Transcript processed on _____