



**TRANSCRIPT REQUEST
INSTRUCTIONS**

Transcript requests are processed by the Registrar at Parker School.

Please use the form on the next page to request transcripts. The following information is required when the form is submitted to the Registrar's Office. **Please allow 72 hours from the date of request.**

1. Name used while attending Parker School
2. Student's Date of Birth
3. Year of graduation or last year student attended Parker School
4. Address where your transcript will be sent
 - a. **OFFICIAL** transcripts are mailed directly to requesting school or organization
 - b. Transcripts will be **UNOFFICIAL** if it is sent via email, fax or if it is mailed to student.

If you have graduated from Parker School, your graduation date will be reflected on your transcript.

Duplicate Diploma:

Duplicate diplomas will not be issued—the diploma is an original document; however, the Parker School Registrar can generate a "Letter of Graduation" on school letterhead. Fill out a Transcript Request Form, select "Letter of Graduation".

All transcript requests must be signed by the student or by the student's parent or legal guardian (if under age 18).

Transcript Request can be faxed, scanned and emailed, mailed, or dropped off at the front desk.

Mail: Parker School
Attn: Registrar
65-1224 Lindsey Road
Kamuela, HI 96743

Email: Registrar@ParkerSchoolHawaii.org
Fax: (808) 885-8327



TRANSCRIPT REQUEST

Select One:

Date of Birth: ____/____/____

- Current PS Student enter grade level
Former Student—Graduated from PS, year of Graduation
Former Student—Withdrew from PS prior to graduation. Last year of attendance

PRINT: LEGAL NAME WHILE ENROLLED AT PS

CURRENT LEGAL NAME (IF DIFFERENT)

CURRENT ADDRESS

CITY

STATE

ZIP

HOME/CELL PHONE

Request for:

- OFFICIAL Transcript. An official transcript is mailed directly to the School or Organization.
UNOFFICIAL Transcript. An unofficial transcript can be picked up, emailed, faxed or mailed to the individual.
Letter of Graduation

If mailing, please PRINT EXACT mailing address where transcript should be mailed:

Name & Address:

Five horizontal lines for entering mailing address.

For unofficial transcripts only:

- Do not mail transcript, check option desired.
Pick up personally on ____/____/____ (date).
Request for ____ (print authorized person's name)
To pick up on ____/____/____
Fax to ____
Email to ____

Student's Signature: _____ Date: _____
(Signature must be the requestor of the above transcript.)

Parent/Guardian must sign below if student is under the age of 18.

Parent/Guardian's Signature _____ Date _____

FOR OFFICE USE ONLY:

DATE RECEIVED: _____ DATE MAILED: _____ RECEIVED BY: _____ PROCESSED BY: _____