



# REQUEST FOR TRANSCRIPT

**Two transcripts free of charge, Three or more \$5.00 each**

**(Cash or check to be included)**

Northeast Metro 916 Career and Technical Center  
3300 Century Avenue N., White Bear Lake, MN 55110  
651-415-5537 Telephone/651-415-5515 Fax

**Please print:**

Student's Name \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
Street City Zip

Telephone #: \_\_\_\_\_ Program: \_\_\_\_\_ Grade: \_\_\_\_\_

Email Address: \_\_\_\_\_

High School Attended: \_\_\_\_\_ Graduation Year \_\_\_\_\_

I/We authorize Northeast Metro 916 to release the undersigned student's transcript to:

College/Business: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Address must be completed for transcript to be mailed.**

Telephone #: \_\_\_\_\_ College Contact: \_\_\_\_\_

Copy for self? Yes \_\_\_\_\_ No \_\_\_\_\_ **(Please enclosed a self-addressed stamped envelope)**

I understand that my signature is *required by state law* giving permission to Northeast Metro 916 to release my transcript data either in paper or electronic format. *If I am under the age of 18, both my signature and my parent(s) signature are required by state law.* **No information can be released without my consent.**

This form will remain in my file in the Northeast Metro Career and Technical Center records office.

Please sign and date below:

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Parent Signature (If student is under 18 years of age) Date

This release is valid for one year from the date of signature.

***Please plan in advance.***

**Processing may take up to ten business days (or, for summer transcripts, ten days from the last teacher day of the school year).**

Campus \_\_\_\_\_ Transcript Sent: \_\_\_\_\_ Initial: \_\_\_\_\_