

High School Transcript Request Form

Complete all applicable fields, typing or writing legibly; failure to do so will result in processing delays. **Your written signature is required** (and parent/guardian signature if under 18 years of age). Courses are reflected on transcripts 7 days after completion of the final exam. **Upon receipt of this request, allow 7-10 days for processing and additional shipping time.** For quicker shipping, contact Student Support Services at (855) 256-4975 for expedited overnight shipping and additional fee information.

Student Name: _____ DOB: _____
Last First Middle Name Date of Birth MM/DD/YYYY

Are you an NCAA or NAIA Student? No Yes – Athlete’s ID #: _____

Current contact information: _____
Student Email Student Phone Number

Enrollment Status:
 Current Student
 Grad - Mizzou Academy
 Non-Graduate
 Withdrawing from diploma program

Recipient #1 Information

Recipient Name #1 _____
Address _____
City State Zip Country _____

Electronic* delivery: Email Address or FAX* (Area Code) + Number

Please indicate format transcript should be sent in:

Electronic * USPS/Air Mail (Domestic/International)

Recipient #2 Information

Recipient Name #2 _____
Address _____
City State Zip Country _____

Electronic* delivery: Email Address or FAX* (Area Code) + Number

Please indicate format transcript should be sent in:

Electronic * USPS/Air Mail (Domestic/International)

To have transcripts sent to more than two recipients, complete an additional separate form.

PAYMENT INFORMATION

(One complimentary request per academic year, begins in July)

PROCESSING FEES – per box checked above (Electronic*/Mail)

\$10 Domestic \$15 International

SELECT METHOD OF PAYMENT

Check/Money Order Fee on Student’s Account

Number of Electronic* Transcripts _____ X _____
Requested Fee price Total

Number of Mailed Transcripts _____ X _____
Requested Fee price Total

**Mizzou Academy no longer accepts credit card information. All payments must be made by check/money order or through the student’s Tiger Portal Account.

TRANSCRIPT REQUEST FORMS ACCEPTED BY:

Email: mizzouacademy@missouri.edu **Fax:** 573-884-9665

Mail:
Mizzou Academy
Attn: Transcript Requests
303 Townsend Hall
Columbia, MO 65211

* Mizzou Academy cannot guarantee all institutions will accept electronic transcripts. Please confirm with the receiving institution their electronic transcript processing requirements. Students and family members will only receive unofficial electronic transcripts.

Your written signature (and parent/guardian signature if under 18 years of age) is required.

_____ Student Signature	_____ Date	_____ Parent Signature (if student is under 18)	_____ Date
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