

# Downers Grove North Transcript Request Form

## ALUMNI ONLY

This form must be completed in its entirety. Official transcripts are \$5.00 each (cash or money order only, no personal checks), and unofficial transcripts are free of charge. Official transcripts will only be released directly to a former student with proof of identity in the form of a photo ID. Records will not be released upon the request of a parent or guardian. If the order exceeds three transcripts, pre-addressed envelopes and postage must be provided for all transcripts to be mailed. Allow 2 to 3 business days to process.

Name	Email address
Maiden name	Daytime phone number
Date of birth	Graduation year
North ID (if known)	

Indicate the number of copies you would like to order:

<p><b>Official</b></p> <p>_____ number of official copies requested</p> <p><u>X \$5.00</u> each</p> <p>\$ _____ total payment remitted (cash or money order)</p> <p><input type="radio"/> <b>mailed (photo ID must be provided if mailing to student)</b></p> <p><input type="radio"/> <b>to be picked up (photo ID must be provided)</b></p>	<p><b>Unofficial (no charge)</b></p> <p>_____ number of unofficial copies requested</p> <p><input type="radio"/> <b>email or fax</b></p> <p><input type="radio"/> <b>mailed (if you do not have email)</b></p> <p><input type="radio"/> <b>to be picked up</b></p>
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Please send transcript to the following:

**Mailing address**

College/Organization/Business Name
Address
City, State, Zip Code

**Fax or email**

Email address
Fax number and to whose attention

\_\_\_\_\_  
Signature (Must be signed by former student. Typed name not accepted.)

\_\_\_\_\_  
Date

Submit *Request for Records* with fee to:

Registrar, Downers Grove North High School, 4436 Main St, Downers Grove, IL 60515  
Email [rschneider@csd99.org](mailto:rschneider@csd99.org) or fax 630-795-8199 for unofficial transcripts

Office Use Only .....

Amount \_\_\_\_\_  Paid  Not paid yet  N/C unofficial  ID OKAY Date picked up \_\_\_\_\_ Date Processed \_\_\_\_\_