

Official Transcript Request

I am requesting my official transcript to be sent to the following postsecondary school or place of employment. I understand the fee for having each transcript sent is \$5.00.

Name while attending Douglas Education Center

Birth Date

Phone Number

Did you graduate?

Program of Study

Start Date of Program

YES NO

Name and address to send my transcript:

Total Fee Paid

Signature

Date of Request

**PLEASE MAIL TO: Education Department
c/o Douglas Education Center
130 Seventh Street
Monessen, PA 15062**