



GLENDALE ADVENTIST ACADEMY TRANSCRIPT REQUEST

700 Kimlin Drive, Glendale, CA 91206
818-244-8671 Fax: 818-546-1180

GAA follows the policy that all transcripts are official and should be mailed DIRECTLY to the organization that needs it, to ensure the utmost security. Transcripts are usually mailed within 24 hours of receipt of request. Fill out a separate form for each transcript requested.

Please: Mail Fax / Mail Deliver to me
Fees: \$3.00 each request \$4.00 Fax and Mail

FILL OUT COMPLETELY:

TO: _____
Name of organization receiving transcript

Number and Street Name

City State Zip Code

STUDENT NAME: _____

Mailing Address: _____

City/State/Zip: _____

INSTRUCTIONS

Current student:

1. First 2 transcripts are free while a student, additional: \$3.00 each
2. Obtain clearance from the Business Office before submitting to Registrar

Alumni Student:

1. Each request is \$3.00 payable at time of request

All Students:

Additional \$1.00 for a faxed copy, Original will be mailed.
Submit by mail, in person, or fax

DOB: _____

Class of: _____

Student Signature (18+ or a senior)

Parent Signature (if student is under 18, non senior)

*****Note: No transcript will be issued unless all financial obligations to the academy have been met**

OFFICE USE ONLY

Business Office: _____ Cleared _____ Paid: \$ _____
_____ Not cleared (hold)

Office Signature

Registrar's Office

Sent: _____

Delivered to student: _____

Billed: _____