

## TRANSCRIPT REQUEST FORM

Please complete the following information. Please note that for a transcript to be considered official it must be sent directly from Milton Academy to the organization or school that is requiring it. An unofficial copy may be sent directly to the student requesting it. Return the completed form by emailing it to [registrars\\_office@milton.edu](mailto:registrars_office@milton.edu) or by fax to 617-898-1710. If you have any questions please feel free to reach out to our office at 617-898-2571. Thank you.

**STUDENT'S NAME:** \_\_\_\_\_

**STUDENT'S DOB:** \_\_\_\_\_

**YEAR OF GRADUATION:** \_\_\_\_\_

**STUDENT'S EMAIL ADDRESS:** \_\_\_\_\_

**STUDENT'S SIGNATURE:** \_\_\_\_\_

**Unofficial Transcript:** \_\_\_\_\_

**Official Transcript:** \_\_\_\_\_

Please send a copy of my transcript to the following (either physical or email address and name):

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