

**NEW LIFE CHRISTIAN SCHOOL**

5909 Jefferson Pike, Frederick, MD 21703

Telephone: 301-663-8418 \* FAX: 301-698-1583

**OFFICIAL TRANSCRIPT/RECOMMENDATION REQUEST  
FORM**

Fee: \$1 each transcript beyond 4

*PLEASE ALLOW 5 WORK DAYS FOR PROCESSING*

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Date Needed: \_\_\_\_\_

I need the following document(s):

\_\_\_\_\_ Official Transcript

\_\_\_\_\_ Unofficial Transcript

\_\_\_\_\_ Recommendation

Circle One:    Send by Mail                  Send by FAX                  Pick-up by Student

Name of School: \_\_\_\_\_

ATTN: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip Codes: \_\_\_\_\_

FAX Number: \_\_\_\_\_

I hereby give permission to release my transcript to the name and address shown.

\_\_\_\_\_

Signature (Required)

Requests will not be processed for any student with an outstanding balance

Office Use Only: Name: \_\_\_\_\_

Request Sent/FAXed/Picked-up: \_\_\_\_\_

Amount paid: \_\_\_\_\_