



**The Academy at MiraCosta**  
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## Official Transcripts Request

### Student Information

- Full Name:
- Student ID No:
- Date of Birth:
- Email Address:
- Phone Number:
- Current Grade:

### Purpose of Request

### Delivery Method

Pick up in person

Email :

Mail to:

Recipient Name:

Institution/Organization:

Address:

Transcript Fee is \$15 per copy. Please include your payment confirmation with this form.

Payment Link: <https://www.paypal.com/ncp/payment/EN6W7QQ9Y2ZSN>

**Signature of Student:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### Important Notice:

Transcript requests may take **up to 10 business days** to be processed. Transcripts will not be issued until payment is received.