

Clark Advanced Learning Center

HIGH SCHOOL TRANSCRIPT REQUEST FORM

Please print, complete, and mail this form to Gwyn Wood, Student Services Specialist, Clark Advanced Learning Center, 2400 SE Salerno Road, Stuart, FL 34997.

IRSC transcripts must be requested separately through the IRSC website at www.irsc.edu.

Student's Name: _____

Number of Copies: _____ Today's Date: _____

- Official Transcript
- Unofficial Transcript

Student's Signature: _____

Where is the transcript going?

- Student Pick Up
- Mail to Student (address) _____

College Address: (IF NOT LISTED AT RIGHT)

Mail to: Please print clearly

(Applicant is responsible for address)

There is no charge for transcripts. Please allow 5 working days for processing. Transcripts may be requested 5 at a time. **No transcripts will be released until all obligations are satisfied.**

CHECK ALL THAT APPLY

<input type="checkbox"/> BARRY U	<input type="checkbox"/> PBAU
<input type="checkbox"/> BETHUNE	<input type="checkbox"/> SOUTH UNIV
<input type="checkbox"/> FAMU	<input type="checkbox"/> STETSON
<input type="checkbox"/> FAU	<input type="checkbox"/> U MIAMI
<input type="checkbox"/> FGCU	<input type="checkbox"/> U TAMPA
<input type="checkbox"/> FIU	<input type="checkbox"/> UCF
<input type="checkbox"/> FL ST COLLEGE	<input type="checkbox"/> UF
<input type="checkbox"/> FLAGLER	<input type="checkbox"/> UNF
<input type="checkbox"/> FSU	<input type="checkbox"/> USF
<input type="checkbox"/> JAX U	<input type="checkbox"/> UWF
<input type="checkbox"/> KEISER/PSL	<input type="checkbox"/> WEBBER
<input type="checkbox"/> LYNN U	<input type="checkbox"/> _____
<input type="checkbox"/> MIAMI INT'L	<input type="checkbox"/> _____
<input type="checkbox"/> NOVA	<input type="checkbox"/> _____

OFFICE USE ONLY

DATE

- Sent via FASTER

- Mailed

- Other
