High School Transcript Request Form

Complete all applicable fields, typing or writing legibly; failure to do so will result in processing delays. Your written signature (and parent/guardian signature if under 18 years of age) is required. Courses are reflected on transcripts 7 days after completion of the final exam.

**Upon receipt of this request, allow 7-10 days for processing and additional shipping time.** For quicker shipping, contact Student Support Services at (855) 256-4975 for expedited overnight shipping and additional fee information.

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**Student Name:**

- Last
- First
- Middle

- Date of Birth

- Enrollment Status:
  - Current Student
  - Grad - Mizzou Academy
  - Non-Graduate
  - Withdrawing from diploma program

**Are you an NCAA or NAIA Student?**

- No
- Yes – Athlete’s ID #:

**Current contact information:**

- Student Email
- Student Phone Number

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**Recipient #1 Information**

- Recipient Name #1

- Address

- City
- State
- Zip
- Country

- Email Address * or FAX (Area Code) + Number

**Please indicate format transcript should be sent in:**

- Electronic *
- USPS/Air Mail (Domestic/International)

**Recipient #2 Information**

- Recipient Name #2

- Address

- City
- State
- Zip
- Country

- Email Address * or FAX (Area Code) + Number

**Please indicate format transcript should be sent in:**

- Electronic *
- USPS/Air Mail (Domestic/International)

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**PAYMENT INFORMATION**

*(One complimentary request per academic year, begins in July)*

**PROCESSING FEES – per box checked above (Electronic*/Mail)**

- $10 Domestic
- $15 International

**SELECT METHOD OF PAYMENT**

- Check/Money Order
- Fee on Student’s Account

**Number of Electronic Transcripts**

- # Requested
- Fee price
- Total

**Number of Mailed Transcripts**

- # Requested
- Fee price
- Total

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**Mizzou Academy no longer accepts credit card information. All payments must be made by check/money order or through the student’s Tiger Portal Account.**

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**To have transcripts sent to more than two recipients, complete an additional separate form.**

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**TRANSCRIPT REQUESTS ACCEPTED BY:**

- **Email:** mizzouacademy@missouri.edu
- **Fax:** 573-884-9665

- **Mail:**
  - Mizzou Academy
  - Attn: Transcript Requests
  - 303 Townsend Hall
  - Columbia, MO 65211

**Please indicate format transcript should be sent in:**

- Electronic *
- USPS/Air Mail (Domestic/International)

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****Mizzou Academy cannot guarantee institutions will accept all transcripts electronically. The recipient’s policies will determine if it will be accepted as official or unofficial. Mizzou Academy’s policy is to only send UNOFFICIAL electronic copies to any recipient that is not part of an academic or governmental institution.**

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**Student Signature**

- Date

**Parent Signature (if student is under 18)**

- Date