

OFFICIAL TRANSCRIPT REQUEST



RETSD ADMINISTRATION OFFICES: 589 Roch St., Winnipeg, Man., R2K 2P7, Phone: 204.667.7130, Fax: 204.661.5618

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TOTAL NUMBER OF COPIES FOR PICKUP (maximum of 5): _____

By me

By this person I authorize:

PHOTO ID MUST BE PRESENTED AT TIME OF PICKUP

STUDENT INFORMATION

Legal last name:		Legal first name:	
Birthdate (dd/mm/yyyy):		Former legal name:	
Last RETSD school attended:			Year of graduation:
Current street address:			
City:	Province:	Postal code:	
Phone:		Email:	

TRANSCRIPT RECIPIENTS

Please send my transcript to the following recipients:

Address:			
City:	Province:	Postal code:	
To the attention of:			Phone:

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To the attention of:			Phone:

Address:			
City:	Province:	Postal code:	
To the attention of:			Phone:

Student signature

Date

This completed form can be dropped off, mailed, faxed or sent as an email attachment to the last senior years school attended. During summer closure, transcript requests can be sent to the Administration Offices. Transcripts sent to incomplete addresses provided on the request may cause delays or returns by Canada Post. The onus is on the requestor to ensure the transcript is received by the stated recipient. River East Transcona School Division is not responsible for the loss or delay of transcripts by Canada Post.