Student Transcript Request Form

This form may only be used to request transcript(s) for recent May graduates during summer months when school registrars are not available.

Please submit request to:

Laura G. Garcia,
Instructional PEIMS Coordinator
4410 Hwy 359
Laredo, TX. 78043
lagarcia@uisd.net
956-473-2182 fax: 473-2098

(PRINT CLEARLY)

Number of copies: _____

Name: _____
Last (Maiden) **First** **Middle**

Date of Birth: _____/ _____/ _____ School ID # _____

Social Security#: _____---_____---_____

Date of Graduation: _____ School of Graduation: _____

If not a Graduate,
Last Date of Attendance: _____ School of Attendance: _____

Home Phone: _____ Cell: _____

Please check box to indicate type of request:

☐ **Ordering in person (956) 473-2182 or 473-5254**
Transcripts may be ordered at the Curriculum and Instruction office with PEIMS Coordinator.
Please note there is a 24-hour processing period.
Photo ID required

☐ **Ordering by mail**
Include this form with the following information:
Copy of photo identification
Stamped self addressed envelope

☐ **Ordering by e-mail**
Attach this form with a scanned copy of photo ID
Please check one:
_____will pick up
_____please mail

☐ **Ordering by fax (956) 473-2098**
Include this form with the following information
Copy of photo identification
Please check one:
_____will pick up
_____ please mail

If you are requesting transcript(s) to be mailed, please send a stamped self addressed envelope(s) to the address above.