



United South High School

Student Transcript Request Form

Use this form to request transcript(s). Please complete all information.

(PRINT CLEARLY)

Number of copies: _____

Name: _____

Last (Maiden)

First

Middle

Date of Birth: ____/____/____ Student ID #: _____

Social Security#: _____-____-____

Date of Graduation: _____

If not a Graduate, last date of attendance: _____

Home Phone: _____ Cell Phone: _____

All information on this form must be accurate in order to complete the request process.

Please check box to indicate type of request:

Ordering in person (956) 473-5400

Transcript(s) may be requested at the Registrar's office in person or by phone.
Please enter through the main entrance of the school to request and/or pick up transcript(s).
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

Ordering by e-mail bnieto@unitedisd.org

Attach this form with a scanned copy of photo ID

Please check one:

____ will pick up

____ please mail

Ordering by fax (956) 473-5599

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 below.

**Please submit request to: Bertha Nieto, Registrar
4001 Ave. Los Presidentes
Laredo, TX. 78046**