

LAMP High School

3440 McGehee Road

Montgomery, AL 36111

Matthew Monson Principal Kelli Muncher Counselor

Telephone (334) 284-7500 Fax (334) 284-7560

FORMER STUDENT TRANSCRIPT REQUEST FORM

Name:	Date:				
DOB:	Cell	/Home Phone:	Graduation	Year:	
	*	****Request MUST be received 2 weeks PRIOR to POSTMARKED BY DATE deadlines and 3 weeks PRIOR to RECEIVED BY DATE deadlines.****			
Name of College	e/University/P	rogram:			
Address to Send	d Transcript:				
To Be Mailed Up	oloaded/Emaile	d:			
****In accordan	ice with the Fa	mily Educational Right	s and Privacy Act (F	ERPA), a parent/guardian or	
eligible student student's educa	-	school written permis	sion in order to rele	ase any information from a	
Student Signatu	ıre:		Date:		
Official Transcri	ipts: \$10.00	Date Received by Coun	seling Dept:	Date Completed:	



Payment must be received before transcripts can be processed.