

SEF Transcript Request Form

Other Name:2024_ Email Address: 62206kamdynd		Date of Birth: Phone Number:			
		Phone Number:	_425-551-8787		
Email Address: 62206kamdyn	@gmail.com or 675060@sul				
		Email Address: 62206kamdyn@gmail.com or 675060@sultanstudents.org			
This unofficial transcript will be shared with the Sultan Education Foundation as part of your scholarship application package.					
Mailing Information					
Your transcript will be mailed to the Sultan Education Foundation:					
Organization	Sultan Education Foundation				
Address Line 1	Box 541				
Address Line 2					
City, State, Zip	Sultan, WA. 98294				
Please complete and sign this form to request a copy of your high school transcript. Transcripts cannot be requested without this form signed. Transcripts cannot be requested by a third party (i.e. a parent or guardian) without student signature. *Once a student is 18 or in a post-secondary setting, we are required by the Family Educational Rights and Privacy Act of 1974 (FERPA) to have the student's hand-written signature to release the transcript. Signature					