



SULTAN HIGH SCHOOL

1000 Turk Drive, Sultan, WA. 98294

SEF Transcript Request Form

Last Name: Groeneveld

First Name: Chloe

Other Name: NA

Date of Birth: 09-30-2005

Class of: 2024

Phone Number: 360-862-3020

Email Address Chloe.amgroeneveld2@gmail.com

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 Chloe Groeneveld

Date 04-08-2024