

## **SEF Transcript Request Form**

Last Name: Fleming	First Name: Jenna
Other Name:	Date of Birth: 10 03 2005
Class of: <u>2024</u>	Phone Number: <u>425 - 359 - 1911</u>
Email Address Jenna Lile	miny 05@gmail. com
<u> </u>	be shared with the Sultan Education Foundation as part of your scholarship
Mailing Information	
Your transcript will be maile	d 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 <u>Jamillormy</u>	Date 2-29-24