## STUDENT TRANSCRIPT

Official Transcript School's Name School's Complete Address

Student's Name: Jennifer Lawrence			Student's Social Security Number:			
Student's Address: 4941 Ke	emper Lane,84660,Sp	oanish Fork			4	
Student's Program Title:						
Program Title	Enrollment Date   I	Required Hours Comple	etion Date Hou	cs Completed	Final Grade	Grade Point Average
Number of Transfer Hours Transfer Hours Accepted Fr			gram/Course(s)_			
SIGNATURE				<u></u>		
Signature of Sch	nool Official	•	Official's Title		Date	Raised Seal of School
A (Excellent) 93%-100% B (Above Average) 85%-92% C (Average) 75% - 84% D (Below Average) 70% - 74% F (Failure)		WP - Withdrew Passing WF - Withdrew Failing Inc Incomplete				

Any grade falling below the school's graduation requirement of 70% (The above sample grades are aligned with recommendations from national accreditating agencies and various state agencies. It is the responsibility of each school to set their grading policy.)

Sample Student Transcript Form/2004