## Transcript Request

## Cornerstone Baptist Academy, Indianapolis, Indiana

To request an official transcript of your high school coursework, please fill out the following form **completely**. Note: If the student is over 18 years of age, the request must be signed by the student.

Return the form to: Cornerstone Baptist Academy

10701 East 56<sup>th</sup> Street

Indianapolis, Indiana 46235

☐ Include test scores

Sent by:\_\_\_\_

Please Print Clearly			test scores	Fax: 317-723-8090
Student's Full Legal Name				Email: cba@cbcademy.net
Address				
City		State	ZIP	
Signature			_ Date	
☐ Sent transcript to me at the	he address above. (This is unofficial.)	☐ Send transcript	to the organ	ization below
Name of Recipient				
Name of School/Organizatio	on			
Address				
Email Address		FAX #		
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City		State	ZIP	
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	he address above. (This is unofficial.)			ization below
Name of Recipient				
Name of School/Organizatio	on			
			ZIP	
Email Address		FAX #		

Office Use: Date Sent \_\_\_\_\_ Method: \_\_\_ faxed \_\_\_ mailed Type sent: \_\_\_ Official \_\_\_ Unofficial