Forrest M. Bird Charter School
OFFICIAL TRANSCRIPT REQUEST FORM

In accordance with 34 CFR 99.30 of the Family Educational Rights and Privacy Act (FERPA), to request an official transcript of all courses you have previously completed and/or transferred to Forrest M. Bird Charter School, please mail, fax or email this completed and signed request to:

Forrest M. Bird Charter School
615 South Madison Avenue
Sandpoint, Idaho 83864
Fax: (208) 763-3196

One of the following email addresses:
benevans@forrestbirdcharterschool.org
christiburns@forrestbirdcharterschool.org
maryjensen@forrestbirdcharterschool.org

Requester's Information

Last Name: _____ First Name: _____

Former Name (*if applicable*): _____

Street address *or* PO Box: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Where would you like a transcript to be sent?

☐ to the **address provided above**

☐ to the following ***address*** / ***fax*** number:
(*circle one*)

Name of Person or Institution: _____

Attn: _____

Street address *or* PO Box: _____

City: _____ State: _____ Zip: _____

Fax number: _____

☐ **upload** an electronic document to the following platform:
* *the requesting party is responsible for initiating the request through the third-party platform according to its policies*

___ Common Application (Common App)
___ QuestBridge
___ National Student Clearinghouse
___ Parchment
___ Other: _____

Signature

Requester's signature (required): _____ Date: _____

* *If the requested transcript is for a student under 18 years of age, a parent / guardian signature is required.*