

Official High School Transcript Request Form

I hereby request the Guidance or Registrar department send my transcripts to LIM College.

Please print:				
Name (while in school)				
Name (if different from above)				
Current Address	City	State	Zip	
Mobile Phone	Email			
Date of Birth	SS#	· -		
School Name	Dates Attended:			
Graduation Date (if applicable)				
Signature		Date		

Thank you for your prompt response to this request.

Complete and mail or email to:

LIM College Admissions 216 E 45th Street New York, NY 10017 admissions@limcollege.edu