



# SOUTHGATE ACADEMY

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7842 East Wrightstown Road \* Tucson, AZ 85715  
T (520) 741-7900 \* F (520) 741-7901 \* [www.southgateaz.org](http://www.southgateaz.org)

Attn: Records Department  
Southgate Academy

Re: High School Transcript Request

I, \_\_\_\_\_, do hereby give my written permission to send  
( \_\_\_\_\_ ) a copy of my official transcript to the name and address identified below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My personal information is as follows:

Social Security Number: \_\_\_\_\_

Name while enrolled: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Requests will be processed in the order they are received and may take 24-48 hours to process. During high volume periods, it could take from 48-72 hours to process requests.

*This email and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this email or any attachments is prohibited. If you have received this email in error, please notify us immediately by returning it to the sender and delete this copy from your system. Thank you for your cooperation.*