

Fairfield Christian Academy Transcript Request Form

This form is to be used for college/job application needs for present HS students and Alumni. Transcripts for students in lower grades need to be processed through the superintendent's office and require a different form.

Please allow 3 to 5 business days for processing from the time the request is received in the FCA high school/guidance office. Transcripts will be mailed out, unless otherwise specified, so please allow for that time.

(Please print clearly)

Today's Date: _____

Mail Immediately: (Please put a check mark) _____

Mail after: (Please put in date) _____

Student/Alumni Name (include maiden name):

Street Address: (Not required if you are a present senior):

City, State, Zip: (Not required if you are a present senior):

Phone: () _____ (Not required if you are a present senior):

Dates of Attendance (or year graduated) (Not required if you are a present senior):

Date of Birth: (Not required if you are a present senior): _____

Mail ____ (# of copies) to address (Please write in the address neatly):

Mail ____ (# of copies) to address: (Please write in the address neatly):

Fax # (if transcript is to be faxed) _____

Attn:

Hand Delivery: (Please indicate if you are going to pick up the transcript) _____

Student/Alumni Signature _____

Please send all transcript requests to:

Fairfield Christian Academy – Guidance Office Attn: Transcripts
1965 N. Columbus Street, Lancaster, Ohio 43130

Or email: kstephens@fcaknights.us

Questions may be referred to 740-654-2889 ext 316