

Official Transcript Request Form

Pine Ridge Academy

12595 South Minuteman Drive Draper, Utah 84020

Phone: 801-781-5257 Fax: 801-523-5077

Main: 801-572-6989 ext 231 Email: records@youthcare.com

PLEASE PRINT CLEARLY:

Date:	Birth Date:	
Name:	Phone:	
House:	_ Discharge Dat	te:
I authorize Pine Ridge Academy to release a school listed below*.	copy of my child's/	my transcript to the
Parent/Guardian or students signature, if you are 18	or older.	
*Note: If you have a hold or financial indebtedness on before an official transcript can be mailed out to you o	-	າ Care, it must be cleared
Please allow for a 72 h	our turn around.	
Mail to:		
Parent/School:		
Address:		
City:	_ State:	Zip:
Fax to: (a fax is an unofficial transcript)		
Fax Number:		
Attention:		
Please Check all boxes that apply: Mail Immediately Mail After Fina	I Grades Mai	il a Copy to Me