



Records Request

Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: _____ Year of Graduation: _____ Student ID Number: _____

Address: _____ City, State, Zip: _____

Telephone Number: _____ Email Address: _____

Name while student at Samohi (if different from current name): _____

Check the box for the records you are requesting:

- Official Transcript (signed and sealed).....\$ 2.50 Each.....Qty: _____
- Unofficial Transcript.....\$ 2.50 Each.....Qty: _____
- Diploma (allow 6 weeks for processing).....\$50.00 Each.....Qty: _____
- Health Records.....\$ 2.50
- Other Information (photocopying).....\$ 0.25 per page

When the records are ready, I would like them to be:

- Picked up in-person by: (name and relationship) _____
- Sent by US Mail to current mailing address above (no additional charge if domestic address)
- Sent by US Mail to address below (postage to be provided by requester if international address):
If you are requesting multiple copies, please provide additional addresses on back of this sheet.
 - Attention (Person/Dept.): _____
 - Business/School Name: _____
 - Street Address: _____
 - City, State, Zip: _____

*I authorize the release of my records as directed on this form and have completed all sections accurately.
I understand that the fees are nonrefundable and that an incomplete form will not be processed.*

Signature: _____ **Date:** _____

Requests for records will not be processed until payment has been received.

Please send in your completed form by mail or email.

Mail payment or schedule appointment for payment.

*Acceptable forms of payment include cash, money order or cashier's check.
(payable to Santa Monica High School) no personal checks will be accepted.*

Records Department

Santa Monica High School
601 Pico Boulevard
Santa Monica, CA 90405

or Email: samohirecords@smmusd.org

**If you are mailing, faxing
or scanning in your
request, place a current
photo identification card
here prior to
copying/scanning.**

Thank you.

FOR OFFICE USE ONLY	
Request Received:	Payment Received:
Completed:	Amount Received: