Transcript Request Form

Submit in person to:
Horizon Christian Academy
School Office
Monday - Friday
8 a.m. - 3 p.m.

Mail or fax to:
Registrar
5331 Mt. Alifan
San Diego, CA 92111
Fax: 858.654.3054

Please Type or Print

Current HCA students: Complete transcript request form and return to registrar. Official transcripts, up to ten per academic year, are free of charge. After ten requests there will be a $5.00 fee for each official transcript requested; payable by check, money order or cashier's check to HCA. Payment must accompany request. Routine requests are processed in 1-3 business days.

HCA alumni and previous students: Unofficial transcripts can be requested in person at no charge. Unofficial transcripts to be mailed/faxed will be charged a $2.00 fee. For official transcripts there is a fee of **$5.00 each**; payable by check, money order or cashier's check to HCA. Payment must accompany request. Routine requests are processed in 1-3 business days.

Last or Family Name First Middle

Name(s) under which you previously enrolled at HCA Social Security Number

Current Address City State Zip

Phone Number (include area code) Email Address

Last year attended/Graduation Date (required) Birthdate (required)

Mailing Address(es): If you have more than 4 addresses, fill out additional forms.

1. Send _____ copy or copies to:

_____

_____

_____

_____

2. Send _____ copy or copies to:

_____

_____

_____

_____

3. Send _____ copy or copies to:

_____

_____

_____

_____

4. Send _____ copy or copies to:

_____

_____

_____

_____

Signature: Federal law (FERPA) requires your signature to process any release of records. Forms without a signature **will not** be processed.

Student Signature Date

For Registrar's Office Use Only

Date form processed: _____
Payment Recv'd: _____
Active/Alum/Prev