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**OFFICIAL TRANSCRIPT REQUEST FROM**

PRINT STUDENT NAME: \_\_\_\_\_ ID# \_\_\_\_\_  
(At the time of graduation)

DATE OF BIRTH: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_ LAST YEAR ATTENDED: \_\_\_\_\_

This will authorize the release of a transcript. Please select one (*unofficial/official*) of the following:

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- \_\_\_ 00C933      MIAMI DADE COLLEGE (HOMESTEAD)
- \_\_\_ 00U973      FLORIDA STATE UNIVERSITY
- \_\_\_ 00U975      UNIVERSITY OF FLORIDA (CENTRAL CAMPUS)
- \_\_\_ 00U988      UNIVERSITY OF FLORIDA (MAIN CAMPUS)
- \_\_\_ 00U976      UNIVERSITY OF NORTH FLORIDA
- \_\_\_ 00U978      UNIVERSITY OF WEST FLORIDA
- \_\_\_ 00U990      FLORIDA INTERNATIONAL UNIVERSITY (MAIN)
- \_\_\_ 00U979      FLORIDA GULF COAST UNIVERSITY



# Miami-Dade County Public Schools

*giving our students the world*

- \_\_\_ 73000000146600 BARRY UNIVERSITY
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- \_\_\_ 730000000157400 GEORGIA STATE UNIVERSITY
- \_\_\_ 730000000148000 FLORIDA A&M UNIVERSITY
- \_\_\_ 730000000395400 UNIVERSITY OF CENTRAL FLORIDA (MAIN)
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CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**COLLEGE/AGENCY:** \_\_\_\_\_

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ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

IF UNDER 18 YEARS OF AGE, PARENT/GAURDIAN MUST SIGN.

STUDENT SIGNATURE

DATE OF REQUEST

PARENT/GUARDIAN SIGNATURE

DATE OF REQUEST

Please complete form and pay the treasurer with the exact amount \$1.50 each.  
Transcript(s) will be processed in 7 to 10 business days.

**MIAMI NORLAND SENIOR HIGH SCHOOL**

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