



Request for Final Transcript

Please complete and send to the school your child last attended.

I authorize the release of academic records, including withdrawal grades, for the following

student _____
(student name)

who was in your _____th grade for _____ to:
(grade level) (school year)

Holly Ainza, Registrar
The Gregory School
3231 N. Craycroft Road
Tucson, AZ 85712
(520) 327-6395
hainza@gregoryschool.org

Parent/Guardian

Signature: _____

Date: _____