



CORTEZ HIGH SCHOOL
8828 N. 31ST AVE
PHOENIX, AZ 85051

TRANSCRIPT REQUEST

RECORDS/CREDENTIALS
623.915.8204 FAX 623.915.8244
Cortez_Records_Fax@guhsdaz.org

There is no charge for this service.

Turnaround time is 48 hours upon receipt of fax, mail or email.

If you are in the area you are welcome to stop in, fill out a request and take it with you.

All information must be completely filled in and legible.

You must Submit a photocopy of your current driver's license or picture ID with your request, no request will be processed without ID

You may need to lighten up your photo ID when you copy it.

BIRTH DATE: Month ____ Day ____ Year ____ YEAR ATTENDED OR GRADUATED: _____

FIRST NAME _____ MIDDLE NAME _____

LAST NAME _____

LAST NAME WHILE ATTENDING SCHOOL _____

DAY NUMBER INCLUDING AREA CODE _____

SEND TRANSCRIPT TO:

Name/School: _____

Attn: _____

Address: _____

City: _____ State: _____ Zip: _____

If wanting transcript emailed, please provide email address: _____

Fill in only if wanting it Faxed:

FAX # (_____) _____ ATTEN: _____

OFFICIAL is sent unless you indicate below – school embossed stamped seal mailed in a sealed envelope. Usually requested for verification of graduation, schools, scholarships, employment, etc.

UNOFFICIAL has an unofficial stamp. Usually requested as copy for self, or insurance, etc.

OTHER: _____

Written Signature _____

(Printing your name above constitutes your signature.)