



*Please submit a COMPLETED Transcript Request Form. Incomplete forms will result in further delay.*

**ACTIVE LHS STUDENTS:** If you currently attend LHS there is **NO CHARGE**.

**FORMER LHS STUDENTS/GRADUATES:** Must submit a \$3.00 fee for each & a copy of official identification (with photo/signature) and postage paid pre-addressed envelope. If you do not have postage, please submit \$3.50 (For 2 free transcripts, contact the Registrar via email at [svalis@sandi.net](mailto:svalis@sandi.net) to verify eligibility).

**Requests by mail** → Submit request, include a copy of photo ID, and a \$3.00 Money Order for the exact amount. **No personal checks or cash.**  
**Address:** Lincoln High, ATTN: Registrar/Transcripts, 4777 Imperial Av, San Diego, CA 92113.

**Requests submitted in person:** → Remit cash or money order payment at the **Finance Office** located in the **Administration Building**.

**Fully complete sections 1 through 5.**

<p><b>1. Select one: Current or Former Student</b></p> <p><input type="checkbox"/> I am <b>CURRENTLY</b> attending Grade _____ or</p> <p><input type="checkbox"/> I am a <b>FORMER</b> student, last school year attended _____</p>	<p><b>2. Select one: I LAST attended the following school:</b></p> <p><input type="checkbox"/> Lincoln HS</p> <p><input type="checkbox"/> Gompers Middle, JHS Secondday, HS (prior 2006-2007)</p> <p><input type="checkbox"/> Wright Brothers</p>
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**3. Please indicate which type with the quantity of Transcripts needed/paid for:**

# \_\_\_\_\_ **Unofficial** (unsigned, embossed & w/o envelope)      # \_\_\_\_\_ **Official** (signed, embossed & sealed in an envelope for official submission—please advise if rank is required)

**4. Method of delivery (ONLY ACTIVE STUDENTS PICK-UP):**

Pick-up **ACTIVE/CURRENT STUDENTS ONLY**

School to mail: Must provide address (if different from home address) below along with a **pre-addressed & postage paid** envelope for *each*.

\_\_\_\_\_

\_\_\_\_\_

**5. Personal Information:**

**Legal Student Name:**

\_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last)

**Birthdate:** \_\_\_\_\_ (Month/Date/Year)      **Best contact phone #:** \_\_\_\_\_ ( ) \_\_\_\_\_

**Home Address:**

\_\_\_\_\_ (Street Name and #) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code)

**Signature:**

**Please do not write below the line, for staff use only:**      Dt: \_\_\_\_\_ Staff: \_\_\_\_\_

COMPLETE/INCOMPLETE: FEE (Insufficient/Missing/Check) I.D. (Non-Official/No Photo/Signature) ENVELOPE MISSING (Pre-Addressed/Postage)

RESPONSE VIA MAIL/EML/PHONE (LFT MSG, NOT IN SVC, V/M FULL, NOT SET UP) DATE/TIME: \_\_\_\_\_

NEW SCHL INFO: \_\_\_\_\_ PARENT/GUARD/OTHER: \_\_\_\_\_