

Transcript Request Form

Students who graduated prior to 2011 must complete this form to request a transcript. If you graduated from Zeeland Public Schools in 2011 or beyond, do not use this form. You will be notified via email once the transcript has been sent.

School graduated from (circle one): Zeeland East Zeeland West Venture Academy

Name (at the time of graduation): _____

Year graduated or last year attended: _____ Date of Birth: _____

Phone number: _____ Email Address: _____

Please send my transcript to: (this information must be correct)

1) Name and Address:

2) Name and Address:

3) Name and Address:

Each transcript will cost \$5.00 to send.

Number of transcripts to be sent: _____ Total dollar amount: _____

Please pay with check, money order or cash, payable to Zeeland Public Schools.

Mail or bring request to:

Zeeland West and Venture: Donna Lyles, Zeeland West High School, 3390 100th Ave, Zeeland MI, 49464

Zeeland East: MaryBeth Timmer, Zeeland East High School, 3333 96th Ave, Zeeland MI, 49464

-----Office use only-----

Received by: _____ Date received: _____ Date sent: _____ Date notified: _____