



Office of Registrar  
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## TRANSCRIPT REQUEST FORM

PLEASE PRINT CLEARLY

DATE OF REQUEST: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MM DD YYYY

FULL NAME: \_\_\_\_\_  
LAST FIRST MIDDLE

DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ NIB #: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
MM DD YYYY

FIRST DATE OF ENROLMENT: \_\_\_\_ / \_\_\_\_ LAST DATE OF ENROLMENT: \_\_\_\_ / \_\_\_\_  
MM YYYY MM YYYY

CURRENT ADDRESS: \_\_\_\_\_  
STREET HOUSE/APT. #

\_\_\_\_\_  
P.O. BOX CITY COUNTRY ZIP CODE

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

### STATUS:

CURRENT STUDENT: \_\_\_\_ GRADE  GRADUATED: \_\_\_\_ / \_\_\_\_  WITHDREW: \_\_\_\_ / \_\_\_\_  
MM YYYY MM YYYY

### REASON FOR TRANSCRIPT:

COLLEGE APPLICATION  EMPLOYMENT  TRANSFER  PERSONAL

NUMBER OF COPIES: \_\_\_\_\_ FEE DUE: \_\_\_\_\_

Address to which transcript should be sent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Signature of Parent: \_\_\_\_\_

#### For Business Office Only

Financial Hold:  Yes  No

Signature: \_\_\_\_\_

#### For Registrar Only

Date Issued: \_\_\_\_ / \_\_\_\_  
MM YYYY

Signature: \_\_\_\_\_