

Vernon Parish School Board

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REQUEST FOR TRANSCRIPT/DIPLOMA

*(PLEASE PRINT THE FOLLOWING INFORMATION
or FILL THIS FORM OUT ELECTRONICALLY)*

Date Requesting Transcript/Diploma: _____

Full Name (As it appears on diploma): _____

Date of Birth: _____ Social Security Number: _____

School Attended: _____

Year Graduated: _____ Years Attended High School: _____
(2012-2016)

Full Name (Current): _____

Home Address: _____

Home Number: _____ Cell Number: _____

**Check the following that is being requested:

_____ Copy of Official Transcript _____ Copy of High School Diploma

Signature

Pick-up Signature

Pick-up Date