

Date Received \_\_\_\_\_

Date Processed \_\_\_\_\_



# St. Augustine High School Purple Knights

Conducted by the Josephite Fathers and Brothers

2800 A. P. TUREAULT AVENUE  
New Orleans, LA 70118  
Phone: (504) 844-2424  
Fax: (504) 847-7712  
Attention: Mr. Ross

PLEASE FILL OUT THIS FORM COMPLETELY AND ACCURATELY

Please prepare an official transcript for:

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

\_\_\_\_\_  
(address)

\_\_\_\_\_  
(city, state, zip)

\_\_\_\_\_  
(Student's Signature)

Year Graduated \_\_\_\_\_

Graduated from St. Aug. Y/N

Please forward transcript to:

If no years attended: from \_\_\_\_\_  
to \_\_\_\_\_

\_\_\_\_\_  
(University, College, Community College, Technical School)

\_\_\_\_\_  
(mail to: address)

\_\_\_\_\_  
(city, state, zip)

\*\*\*\*\*  
Please forward an additional transcript to:

\_\_\_\_\_  
(University, College, Community College, Technical School)

\_\_\_\_\_  
(mail to: address)

\_\_\_\_\_  
(city, state, zip)

**\$3.00 for 1<sup>st</sup> request**  
\*\*\*\*\*  
**\$1.00 for EACH ADDITIONAL REQUEST**  
(all request must be received at the same time)

**OFFICIAL TRANSCRIPTS ARE SENT DIRECTLY TO INSTITUTIONS AND PLACES OF BUSINESS ONLY! TRANSCRIPTS MAY NOT BE HAND-CARRIED OR SENT DIRECTLY TO THE REQUESTEE; SAINT AUGUSTINE HIGH SCHOOL DOES NOT DISTRIBUTE UNOFFICIAL TRANSCRIPTS TO GRADUATES, INSTITUTIONS, OR PLACES OF BUSINESS.**

REQUEST FOR TRANSCRIPTS