



# Liberty High School Transcript/Record Request Form

Erica Meintz, Registrar  
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**PLEASE PRINT:**

Year of Graduation \_\_\_\_\_ or Last Year Attended \_\_\_\_\_

Name \_\_\_\_\_  
Last Name while enrolled at LHS First Name Middle

Home Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Official (preferred for colleges/scholarships)  Unofficial

**Where do you want us to send Record/Transcript?**

- College/University/Vocational/Technical School
- Student Hand-Carry to Institution
- Scholarship/Financial Aid Application
- Employer
- Military
- Self/Personal

**Name of College/Employer:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Other:** \_\_\_\_\_

If your college application requires an electronic transcript or if you desire it to be sent electronically, please sign below. Please know that this document will not be considered secure.

**Yes, please send my transcript electronically to:** \_\_\_\_\_  
Email address

I authorize Liberty High School to release all requested records and recommendations to colleges to which I am applying for admission.

\_\_\_\_\_  
Signature of Student (Or Parent/Guardian if student is under 18) Date

**Please attach all necessary paperwork to be mailed with the transcript and return to the Registrar or Counselor.  
Please allow 24 to 48 hours to process this request.**

For office use only:  
Date Received: \_\_\_\_\_  
Date Sent: \_\_\_\_\_ Mailed: \_\_\_\_\_ Faxed: \_\_\_\_\_ Hand Delivered: \_\_\_\_\_ Initial: \_\_\_\_\_