



Mercy High School – Burlingame, CA
Transcript Request Form

DATE: _____

Student/Alumna Information

Last Name _____
Maiden Name (if applicable) _____
First Name _____
Date of Birth _____
Year of graduation _____
Email address _____
Phone number _____

Transcript Information

- Unofficial Transcript No. of copies: ____
 Official Transcript (sealed, signed) No. of copies: ____

Where to Send Transcripts

- Pick up in Mercy High School Main Office
 Mail to:

College/University/Institution/Person _____
Street Address _____
City/State/Zip _____

College/University/Institution/Person _____
Street Address _____
City/State/Zip _____

College/University/Institution/Person _____
Street Address _____
City/State/Zip _____

Signature _____

Date _____

Transcripts are mailed within five work days. Please direct any questions to Stephanie Montoya, Registrar, at 650-762-1111 or smontoya@mercyhsb.com. You will be contacted via email when your transcripts have been mailed. If you are a current Mercy student, transcripts will be mailed electronically via Naviance when possible.