



Official Transcript Request

Pacifica Christian High School

1730 Wilshire Blvd.
Santa Monica, Ca 90403
Phone - (310) 828-7015
Fax - (310) 829-2063

Student Name

Street

City State Zip

Daytime Phone Number

Email

Today's Date

Number of Copies

Dates Attended

Graduating Year

Mail transcript to:

School/Company

Street

City, State & Zip

I authorize Pacifica Christian High School to release my transcripts as requested above.

Student's Signature

For office use only

Date Sent _____