

'Iolani School
Registrar's Office
563 Kamoku Street
Honolulu, HI 96826

Transcript Request Form

To request your transcript, send \$10.00 per transcript via check or money order made payable to **'Iolani School**. Upon receipt of your payment, your transcripts will be mailed to the address indicated below. ***Please allow 2 weeks for processing.***

Note: Diplomas are not reissued. Diplomas are not reissued, since signatures of past principals/presidents who originally granted diplomas cannot be obtained. For educational and work purposes, the official transcript will suffice as long as it is signed by the school's current Registrar, has the school seal, is dated and placed in a **sealed** envelope.

For any questions, please call (808) 943-2323, or email registrar@iolani.org.

Full Name:

_____ Last _____ First _____ Middle _____

Current Address:

_____ Zip Code _____

Date of Birth:

____/____/____

Social Security Number:

Graduation Date:

____/____/____

Email Address:

Purpose for request:

Employment

Education

Self

Transcript 1

Unofficial

Official (Dated, signed and sealed)

Send to

Contact Person

Address

City and State

Zip Code: _____

Transcript 2

Unofficial

Official (Dated, signed and sealed)

Send to

Contact Person

Address

City and State

Zip Code: _____

Transcript 3

Unofficial

Official (Dated, signed and sealed)

Send to

Contact Person

Address

City and State

Zip Code: _____

Total number of transcripts requested: _____ @ \$ 10.00 per transcript = \$ _____

Mail transcript request with payment to:

'Iolani School
Attn: Registrar's Office
563 Kamoku Street
Honolulu, HI 96826