



Golf Academy of America

HIGH SCHOOL TRANSCRIPT REQUEST

- Student: 1. Complete Section A
2. Check box for appropriate campus location in Section B (where transcript to be sent)
3. Sign and date form in Section C

Table with 2 columns and 11 rows for student information: Name of Student, Name while attending high school, Student's current address, City, State, Zip, Name of High School, School's Street Address, School's City, State, Zip, Date of Graduation, Social Security Number, Date of Birth, Expected Start Term at the Golf Academy.

B. Mail Transcript to:

Golf Academy of America - Orlando, FL
1200 E. Altamonte Dr., Unit 1010
Altamonte Springs, FL 32701
Phone: (407) 699-1990

Golf Academy of America - The Carolinas
3268 Waccamaw Blvd.
Myrtle Beach, SC 29579
Phone: (843) 236-0481

Golf Academy of America - San Diego, CA
1950 Camino Vida Roble, Suite 125
Carlsbad, CA 92008
Phone: (760) 734-1208

Golf Academy of America-Phoenix, AZ
670 N. Arizona Ave., Suite 13
Chandler, AZ 85225
Phone: (480) 857-1574

C. Student Signature / Date

- High School Official: 1. If a name change occurred, please note on transcript.
2. Official high school transcript needs to contain: Graduation/diploma date, Raised school seal, Signed/dated by designated school official
3. Mail student's official transcript in a sealed envelope to the campus location indicated in Section B.