



EVSD Administration  
 Attn: Transcript Requests  
 12325 E Grace Ave.  
 Spokane, WA 99216  
 Phone: (509) 241-5100  
 Fax: (509) 755-3503

## *Transcript Request*

School Attended	
Year Attended or Graduation	
First Name	
Last Name	
Middle Initial	
Maiden Name	
Date of Birth	
Mailing Address	
City	
State	
Zip	
Phone	
Fax	

**Please send a copy of my Transcripts to:**

Name	
Address	
City	
State	
Zip	
Phone	
Fax	