



DINÉ COLLEGE  
Office of Admissions  
P.O. Box C-02  
Tsaile, Arizona 86556



## OFFICIAL HIGH SCHOOL TRANSCRIPT REQUEST FORM

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**TO:** *(High School's name and mailing address)*

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\_\_\_\_\_

I have applied for admission to Diné College and I am requesting for my OFFICIAL High School Transcript (*Stamped & Sealed*) to be mailed to the following address:

Diné College Office of Admissions  
P.O. Box C-02  
Tsaile, Arizona 86556

High School Transcript                      Date of High School Graduation: \_\_\_\_\_

High School  
Equivalency Score (GED)                      Date of Equivalency (GED) Received: \_\_\_\_\_

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*Student Information*

Full Name: \_\_\_\_\_ Maiden: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Diné College Office of Admissions

[admissions@dinecollege.edu](mailto:admissions@dinecollege.edu)

P.O. Box C-02 Tsaile, Arizona 86556

Phone: (928) 724-6634/6638

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