



TRANSCRIPT REQUEST

The following information will be needed to fulfill your request: Please print clearly.

First Name _____ Last Name _____
 Date of Birth _____ Class or Year Graduated _____
 Phone Number _____ E-mail _____

RECORDS REQUESTED	Check Here ✓
Unofficial Transcript	<input type="checkbox"/>
Official Transcript	<input type="checkbox"/>
Unofficial GED Diploma Copy – <i>Official copies must be requested through the State of Alaska GED Office. Phone: 907-465-4685 E-mail: ged@alaska.gov</i>	<input type="checkbox"/>
WorkKeys Assessment Test Scores	<input type="checkbox"/>
ASVAB – Armed Services Vocational Aptitude Battery Results	<input type="checkbox"/>
TABE – Test for Adult Basic Education Scores	<input type="checkbox"/>

Send above requested records to:

- Name / School/Company _____
- Fax Number _____
- E-mail Address _____
- Mailing Address _____

Send Completed Transcript Request Form To:

Attention: Lynn Andrews – AMYA Registrar

E-mail: mva.amya.registrar@alaska.gov or
Lynn.Andrews@alaska.gov

Phone: 907-428-7338

Fax: 907-428-7381

Mail: Alaska Military Youth Academy Registrar
PO Box 5727 JBER, AK 99505-0727

X _____
Printed Name

X _____
Signature