



El Monte Union High School District
EL MONTE-ROSEMEAD ADULT SCHOOL

Administrative Office
10807 Ramona Boulevard, El Monte, California 91731
(626) 258-5800

Students Document(s) request form

In order for the registration office to approve the release of requested document(s), you must show proof of identification:

Enrollment and Attendance Verification

CTE Business Occupations [] CTE Medical Occupations [] ESL []
High School Diploma [] Distance Learning [] Parenting []

Transcripts

High School Diploma [] CTE Vocational Nursing [] GED [] (Yr. Completed _____)
All official transcripts have a cost of \$5 per transcript Number of transcripts requested []

Last Name: _____ First Name: _____

Date of birth: _____ / _____ / _____ School ID# _____

Documents requested on: _____ **Please allow 48 hours for completion of requested documents**

Phone Number: () _____ - _____ Email _____@_____

For office use only

Proof of identification provided: Driver's License [] California ID [] Passport [] Other []

Received Documents: _____
Date

Name _____ Signature _____

Initials of registration office personnel _____