



Santa Monica College - Office of Admissions & Records
**REQUEST FOR WAIVER OF THE
HIGH SCHOOL TRANSCRIPT REQUIREMENT**

FOR OFFICE USE ONLY

Received by: _____

Date Received: _____

Approved by: _____

Legal Name: <i>Last</i> _____ <i>First</i> _____ <i>Middle</i> _____		
SMC ID Number	Date of Birth / /	Telephone Number () -
Street Address:		
City:	State:	Zip Code:
Graduation Date:		Grade Point Average:

Submission of High School Transcripts is a requirement of Admission to Santa Monica College for all fully matriculated students. The College recognizes that in rare circumstances, students may not be able to obtain their high school transcripts for reasons beyond their control.

I am requesting a waiver for the High School Transcript Requirement because:

- My High School no longer exists because:
 - It closed on _____ (date)
 - It was destroyed on _____ (date). Please tell us how or why _____
- I attended a foreign high school in _____ (country), and I cannot retrieve them from my home country because _____
- I did not attend high school. Please list highest grade completed: _____
- I possess a Bachelor's Degree or higher from _____ (college/university)
Degree granted _____ (date)
- Other _____

Name of High School (or last school attended):			
Street Address:			
City:	State:	Zip Code:	Country:
Graduation Date (If other than High School):		Grade Point Average (If other than High School):	

I, the undersigned, certify that information I have provided on this form is complete and accurate to the best of my knowledge. Furthermore, I realize that any purposeful misrepresentation, falsification or omission of pertinent data may result in my dismissal.

Student's Signature _____ Date _____