



**Request for Transcript - 22+ Program**

*Please send transcripts to:* s.forsythe@valleyvirtual.org  
or fax to 330.533.8777

TO: (previous school name) \_\_\_\_\_

The following student is enrolling in MCEC / Valley Virtual Remote Learning Academy  
22+ Diploma Program.

Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Last Year Attended \_\_\_\_\_ Grade \_\_\_\_\_

Date of Birth \_\_\_\_\_

STUDENT TRANSCRIPT

STATE TESTING RESULTS

IEP / ETR / ANY SPECIAL NEEDS INFORMATION

I understand that my signature on this form authorizes the named school to send my transcripts  
to Valley Virtual Remote Learning Academy for the 22+ Diploma program.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Valley Virtual Remote Learning Academy**  
7320 N. Palmyra Road, Canfield, Ohio 44406  
330.533.8755 ext. 1181 fax 330.533.8777