



Official High School Transcript Request Form

Current Students

Student's Name: _____

Date: _____

Student's Date of Birth: _____

Grade of Student: _____

Check the items needed to be sent or picked up:

____ Official high school transcript

____ Senior year classes/course schedule

____ Official ACT/SAT scores (Some colleges require they be sent directly from ACT/SAT.)

Check a box below.

____ Send form(s) to the institution below.

____ Student will pick up their forms in the guidance office.

Name/Address of the University/College:

Paid: _____

Sent date: _____

Sent by: _____

*****Remember to turn in request form at least 1 week before it needs to be mailed or picked up.**

Student Signature: _____

All official transcripts are \$3.00. Payment is due to the front office at the time of your request. Please try to use correct change when possible.

