TRANSCRIPT REQUEST FORM

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Student I. D. Number — Yr. of Grad.

PRINT LAST NAME, FIRST M.I.

Please allow 10 school days for this request to be processed. Each transcript request is $1.00.

Date Submitted: _____

Send to: _____ **Deadline Date:** _____
(College and/or Self)

Address: _____ **DATE MAILED:** _____

City/State/Zip _____ **Application Fee Received** _____ **Fee Mailed** _____

Paid ($1.00 fee for Transcript) _____ **Applied online** _____

Message to Counselor:

_____

_____

Hold for the following Recommendations: _____
(All teacher recommendations must be sent in with the application.)

INSTRUCTIONS FOR FILLING OUT THIS TRANSCRIPT REQUEST FORM

- **Bring ALL completed application materials (signed application, application fee payable to the college/university) to the Guidance Office at least 10 school days prior to the intended mailing date. If an essay is required, be certain your name is on it!**

- **Follow These Procedures:**

#1 Complete the green Transcript Request Form (other side of this) found in your House Office. There is a section on the Transcript Request Form where you can make a comment to your counselor. If applicable, use this section to remind your counselor of any recommendations which will be sent with your application. It is your responsibility to inform any teachers writing recommendations to return their recommendations to your counselor so they will be mailed with your application.

#2 Attach the green Transcript Request Form to your application materials and give them to your House Secretary and pay her the $1.00 processing fee. You will be given a receipt.

#3 You have now completed the Transcript Request process. All materials will be mailed together from your Counselor's Office. You do not need to provide an envelope or postage.