

TWIN VALLEY SCHOOL DISTRICT
FORMER STUDENT
RELEASE OF TRANSCRIPT RECORD

I hereby give permission to Twin Valley High School to release my academic transcript record to:

Provide full address of employer/ school, university that will receive OFFICIAL transcript directly:

_____ Check here if you wish an UNOFFICIAL transcript mailed to your home address provided below:

Student Name (Maiden, if applicable)

Date of Birth

Student Signature

Year of Graduation/Last Attended

Student Phone

Today's Date

Processing requires approximately 5 business days. If you have any questions regarding your request, please call Twin Valley High School Guidance at (610)286-8630 or fax (610)286-8604.