



Principal: Dave McMahon / dmcmahon@crestwoodschoools.org
Asst. Principal: Michael Horning / mhorning@crestwoodschoools.org
Guidance Counselors: Jill DeRamo, Karen Graves, Lynne Morrison
Director of Athletics and Activities: Troy Spiker
Main Office: 330-357-8205 / Fax: 330-274-3150

Date: _____

First Name: _____

Middle Name: _____

Last Name: _____

Last Name if different from graduation: _____

Phone: _____

Date of Birth: _____

Social Security Number: _____

Did you graduate? Yes No

Year of Graduation: _____ or Last Year of Attendance: _____

Is there any other information that would assist in the location of your transcript?

Please send transcript to:

Name of School/Employer: _____

Email: _____

Address: _____

City: _____

State: _____

Zip Code: _____

I hereby authorize release of my official transcript.

Signed,

There is a \$2.00 fee for transcripts - cash, check or money order made payable to Crestwood High School. Any questions, contact Michelle Sweet at 330-357-8205 ext. 1002