



REQUEST FOR HIGH SCHOOL REISSUED TRANSCRIPT

Reissued Transcript (\$5.00* each)

Send request and payment to **YOUR GRADUATING HIGH SCHOOL DIRECTLY.**

***Cash, Money Orders, Cashier Checks, and Company Checks can be accepted.** Personal checks **are not** accepted. **Fees are nonrefundable.**

PRINT or TYPE the following information:

Student's Current Name (First Middle Last)

Date of Birth (mm/dd/yy)

Student's Name at Graduation (First Middle Last)

Phone Number (with Area Code)

Name of High School

Date of Graduation (mm/dd/yy)

Graduate's Current Mailing Address:

Return this completed form with a copy of either a driver's license or state-issued identification card along with the appropriate payment the high school directly.

Signature of Graduate

Today's Date

Received by: _____