



**COLLEGE READY.
CAREER READY.
LIFE READY.**

EAST BRUNSWICK MAGNET SCHOOL

Michael Cappiello, Principal

Joseph Adochio, Assistant Principal

Jason Garzone, Assistant Principal

Morgan Lalevee, Ed.D. Assistant Principal

Transcript Request Date: ____/____/____

Please print your **FIRST AND LAST NAME USED WHILE ATTENDING SCHOOL** below:

I, _____, hereby
authorize the Guidance/CST Department to send a complete transcript of my records to:

Name of College: _____

Email for College Admissions: _____

Address of College _____

City, State, Zip Code: _____

Department (if applicable): _____

Please check appropriate box:

☐ GRADUATED Graduation Year: _____

☐ DID NOT GRADUATE Years Attended: from _____ to _____

Student Signature: _____

Contact Phone Number: _____

Contact Email: _____

For office use only: ____pick up ____email ____USPS mail date: ____/____/____