Archbishop Wood High School

655 York Road
Warminster, PA 18974

Transcript Release Form

I hereby authorize Archbishop Wood High School to release a copy of my high school transcript to:

Name of Institution: _____

Attention: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

Graduate Information

Name: _____

Maiden Name: _____

Current Address: _____

Phone Number: _____

Email: _____

Year of Graduation: _____ Last Year Attended: _____

Signature: _____ Date: _____

There is a $5.00 fee for transcripts (Cash or Money Order ONLY). Please send to Archbishop Wood or come directly to the Business Office Room 245. Office is open from 8:00 AM to 2:30 PM. No transcript will be released if there is a financial obligation due.