East Brunswick High School

380 Cranbury Road, Counseling Department
East Brunswick, New Jersey 08816

Request for Transcripts – Former Students
(Please allow up to ten (10) School Days to Process Request

Full Name	
Name at Graduation/Withdrawal	
Date of Birth	
Date of Graduation/Withdrawal	
Current Phone # and Address	
Email Address	

Check ALL that apply (For additional space, use the back of this form or attach additional sheets):

☐ **UNOFFICIAL TRANSCRIPT** to be mailed or emailed to the NAME and ADDRESS below:

_____

_____

_____

☐ **OFFICIAL TRANSCRIPT** to be mailed or emailed to the NAME and ADDRESS below:

(Please note that **official** transcript(s) can only be emailed to institutions that accept official copies in digital form. It cannot be emailed to you as it otherwise needs to be received in a sealed and unopened envelope.)

_____

_____

_____

Processing Fee: $3.00 per copy requested. Payable in **CASH** or **MONEY ORDER** only.

NO PERSONAL CHECKS

Number of Unofficial Copies Needed: _____ **Number of Official Copies Needed: _____**

Total Dollar Amount Enclosed: $_____

I, the undersigned, acknowledge and approve the release of pertinent school records to the institutions(s) and/or individual(s) noted on this request.

Signature: _____Date: _____

FOR OFFICE USE ONLY

Date Received: / / **Amount Paid: $**

Date Completed: / / **Received via: Drop-off / Email / Fax / Mail / Phone**

Cash or Money Order? (Circle One) **Staff Initials:**

Rev: 7.1.26