

TRANSCRIPT REQUEST - Students (2020/2021)

I request that my transcript be sent to:

Today's Date

Name of college/university (or other) to send transcript

Address of college/university

City

State

Zip Code

Date or Month/Year of Graduation

Signature of Student

Printed name of Student

***** Parents must put their request for class rank information in writing to Dr. Granger's office. (Must include the name and address of the college where the transcript should be sent).**