

Charles Herbert Flowers High School Guidance Office and Counseling Department

REQUEST FOR RELEASE OF TRANSCRIPT

To request a transcript, please complete and submit this form to the Guidance Office. There is a hanging folder in the office designated for submission. Your request will be completed within 3 business days. You will then need to return to retrieve your transcripts. Please retrieve your completed transcripts from the rolling file cabinet next to the Guidance Secretary's desk. They are filed alphabetically.

Important Notice - We will no longer mail transcripts to colleges and universities. However, if a college submits an official request for a transcript on your behalf, we will send the transcript directly to the college.

****Seniors, please make arrangements to request and pick up your final transcripts. Please check with the Guidance Office after graduation to determine when they will be available for processing.**

Student Name: _____

Student ID Number: _____

Grade: _____

Graduation Date: _____

If you did not graduate, please list the last year of attendance: _____

Number of transcripts requested (Maximum is 5): _____

Please ensure that you sign this request. If you are under the age of 18, your parent must sign this request.

Student Signature

Parent Signature