

# South Tahoe High School Transcript Request Form

Student Name:		Today's Date:	
Student Date of Birth:		Student ID #:	
Student Phone #:		Student Email:	

Select One:

- Current Transcript
- RUSH: Current Transcript:                      Reason: \_\_\_\_\_
- Mid-Year Report (After first semester grades are recorded)
- Final Transcript (After Graduation / second semester, grades are recorded)

Needed for:

- College
- Scholarship
- Employment
- Other

Number of Transcripts needed:

- Official:                      \_\_\_\_\_
- Unofficial:                      \_\_\_\_\_

Select One:

- Pick up at school
- Mailing requested
- Fax (Provide fax number, name of institution, and contact person)

Mail transcript(s) to: Name of School/Program, Address, City, State, Zip Code

1. _____ _____ _____ _____	2. _____ _____ _____ _____
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## FOR OFFICE USE ONLY

Date Mailed:		Initials:	
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