

Transcript Request Form

Please allow 1 business day (from the time the completed form is received in our office) to process this request. R.B. Stall High School must have the signature of the student in order to release transcripts. If the student is under the age of 18 years old, his/her parent/guardian can request/pickup transcript(s). Transcripts will not be released without proper identification. **\$5.00 Fee for each official transcript**

Date: _____

Student's Full Name: _____

Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Graduate? _____ Non-Graduate? _____ Grad Year: _____

*If non-graduate, last year enrolled: _____

All transcripts are sealed & marked *official* unless otherwise specified by student

Official? _____ Unofficial? _____ Quantity _____

ACT scores? (If available) Y _____ N _____

Student would like transcript: Pick Up _____ Mail _____ Email _____

Email/Mailing address: _____

Signature: _____

FOR OFFICE USE:

Date Requested _____ **Pickup Date** _____ **Email/Mail Date** _____

Completed _____ **Signature** _____