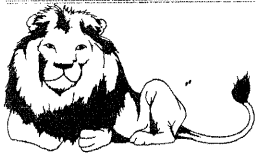


GAHANNA LINCOLN HIGH SCHOOL



OFFICIAL TRANSCRIPT REQUEST FORM

GUIDANCE DEPARTMENT

*Counselor: _____

*An OFFICIAL transcript must be sent from institution to institution.

*Only UNOFFICIAL transcripts will be released to students/parents/guardians.

*Each transcript will cost \$2.00.

*Allow FIVE (5) school days for processing all requests. ***POST MARK BY:** _____

**NOTE: Requests submitted without a five day processing time will be assessed a \$10 rush fee.

**ALSO NOTE: *We CANNOT process a transcript request without a minimum of 48 hours notice.*

*Requests forms must be signed by a parent or guardian if, the student is not yet 18 years of age.

Today's Date: _____

Student I. D. #: _____

Year of Graduation: _____

Student's Name: _____

(PRINTED PLEASE)

Signature (Student or Parent /Guardian if under 18 yrs. of age.) _____

Please send an Official Transcript to:

Are you using
the Common
Application?

1. _____ Check if done ON LINE: _____ Y__ N__
College Name

Address _____

City _____ State _____ Zip _____

2. _____ Check if done ON LINE: _____ Y__ N__
College Name

Address _____

City _____ State _____ Zip _____

3. _____ Check if done ON LINE: _____ Y__ N__
College Name

Address _____

City _____ State _____ Zip _____

PLEASE RETURN THIS FORM TO THE REGISTRAR IN THE GUIDANCE OFFICE

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY

Date Sent _____