



## TRANSCRIPT REQUEST

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ SS#: xxx - xx - \_\_\_\_\_

(Last 4 digits only)

Send Transcript to: \_\_\_\_\_

\_\_\_\_\_

Graduation Year \_\_\_\_\_ [Non-grade] Year Left \_\_\_\_\_

**Where did you graduate from? (Choose one.)**

N. B. H. S. \_\_\_ Pulaski H. S. \_\_\_ Adult Ed/GED \_\_\_ Adult Ed/HSCDP \_\_\_ N. B. Academy \_\_\_

Present Address: \_\_\_\_\_

\_\_\_\_\_

Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ **Fee \$5.00** \_\_\_\_\_

**Please read carefully:**

- Each request for a transcript requires a signed Release of Information or equivalent before the transcript can be mailed out.
- Please indicate if you also need SAT/ACT scores or immunization records. They are not sent out automatically.
- There is a \$5.00 fee for a regular transcript (payable to New Britain High School) in cash, check or money order before the transcript will be sent out. A request for anything additional may result in added fees (i.e. immunizations only \$3.00).
- A transcript sent directly or hand carried to the student will be unofficial.
- A minimum of two days is required for processing the request.

**RELEASE OF INFORMATION**

I hereby authorize the New Britain High School Guidance Department to disclose to the designated representative of schools, colleges, universities, industry, business, etc. information concerning my scholastic performance and attendance record and any other information requested while a student at New Britain High School. I hereby release you from any and all liability or damages for providing the information requested. **I give permission for New Britain High School to release any SAT/ACT scores as part of my transcript.**

\_\_\_\_\_

Signature

\_\_\_\_\_

Date