

# Transcript Request Form

Central Linn High School

Please allow **3 to 5 business days** for processing from the time the request is received.  
CLHS **MUST** have the signature of the student if they are over 18 years old.

## Directions:

- 1) Print this form. (Forms are also available in the high school office)
- 2) Fill out form. If you are requesting to receive your transcript in person, only your name is required in the Student Information section.
- 3) Turn form in to the high school office to be processed.
- 4) *Form may also be mailed or Faxed to:*

Central Linn High School  
ATTN: Registrar  
32433 Hwy 228  
Halsey, OR 97348  
Fax (541) 369-3455

I would like:  OFFICIAL TRANSCRIPT  UNOFFICIAL TRANSCRIPT # OF COPIES: \_\_\_\_\_

- I would like to receive my transcripts in person.  
 I would like my transcripts to be picked up by \_\_\_\_\_.  
 I would like my transcripts sent to an Employer or College listed below.  
 I would like my transcripts sent to me.

## PLEASE SEND / FAX A COPY OF MY TRANSCRIPT TO:

Name of Employer or College		
Street Address 1		
Street Address 2	Fax Number ( )	Fax Attention To:
City	State	Zip Code

## STUDENT INFORMATION:

Student's Full Name	Graduation Year	
Street Address 1		
Street Address 2		
City	State	Zip Code
Phone Number ( )	Date of Birth (00/00/0000)	

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## FOR OFFICE USE:

REQUEST REC'D BY: \_\_\_\_\_ DATE REC'D: \_\_\_\_\_ DATE Completed: \_\_\_\_\_ DATE MAILED: \_\_\_\_\_