## **TRANSCRIPT REQUEST INSTRUCTIONS**

Please complete the attached Transcript Request Form. Anyone under the age of 18 must have a parent sign as well as the student. Requests will not be processed without the proper signatures.

Upon completion of the form, you may either fax it to the Guidance Office at (302) 697-4952 **OR** mail it to Kimberly Summerfield at POLYTECH High School Guidance Office, P.O. Box 97, Woodside, DE 19980. Please allow 4 working days from receipt of the request for your transcript(s) to be processed.

You are responsible for picking up the materials from the Guidance Office between the hours of 8:00 a.m. and 3:30 p.m. weekdays. In the event you cannot personally pick up your transcript, please fax your signed authorization stating who you designate to make the pick-up for you. A photo I.D. is required before we will release materials to you or your designee.

## **POLYTECH HIGH SCHOOL – TRANSCRIPT REQUEST FORM**

AME:		).#	SHOP:								
DATE OF BIRTH:		GRADUATION DATE:									
ATTENDED:				GRADES COMPLETED:							
ACT / SAT SCORES ON FILE IN GUIDANCE OFFICE:			NO If scores are NOT on file in Guidance, please attach copy of Scores Report to this form.								
Date of Request College / Scholarship					Date <u>Mailed</u>	Date Stude <u>Picked U</u>					
_	YES	NO	If	yes, please	e see Mr.	Bassett.					
SIGNATURE			PARE	NT/GUARDIAN	I SIGNATUF	RE					
HOME ADDRESS:PHONE # (Day):				(Evening):							
	SCRIPT AND INCLUDE METHOD INCLUDE ME	Script and include my college the undergraduate Admissions  College / Scholarship Name  ARTICIPATE YES EGE?  SIGNATURE	EILE IN GUIDANCE OFFICE: YES  Script and include my college admiss the undergraduate Admissions Office College / Scholarship Name  College / Scholarship Name  ARTICIPATE YES NO EGE?  SIGNATURE	GRADES CONTILE IN GUIDANCE OFFICE: YES NO  Script and include my college admission test such the undergraduate Admissions Office at the follogies / Scholarship Name  College / Scholarship Name  Official  ARTICIPATE YES NO If EGE?  SIGNATURE  PARE	GRADES COMPLETED:  GILE IN GUIDANCE OFFICE: YES NO  If scores are NO please attach or to this form.  Script and include my college admission test scores for the or the undergraduate Admissions Office at the following college  College / Scholarship Name  Gript and include my college admission test scores for the or the undergraduate Admissions Office at the following college  # of # of Official Unofficial  Gript and include my college admission test scores for the or the undergraduate Admissions Office at the following college  # of # of Official Unofficial  Gript and include my college admission test scores for the or the undergraduate Admissions Office at the following college  # of # of Official Unofficial  # of # of # of # of Official Unofficial  # of # of # of # of # of Official Unofficial  # of # o	please attach copy of Scores to this form.  script and include my college admission test scores for the following so the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions Office at the following colleges/university of the undergraduate Admissions					

**ATTENTION: PLEASE ALLOW 4 WORKING DAYS FOR THIS REQUEST TO BE PROCESSED.** 

IAME:	I.D	I.D. #		SHOP:			
ACT / SAT SCORES ON FILE IN GUIDANCE OFF		YES	NO ple	f scores are NOT on file in Guidance, lease attach copy of Scores Report o this form.			
	ny transcript and include my college a or for the undergraduate Admissions						
Date of <u>Request</u>	College / Scholarship Name		# of <u>Official</u>	# of <u>Unofficial</u>	Date <u>Mailed</u>	Date Studer <u>Picked Up</u>	
				_			
NOTES:							

**ATTENTION: PLEASE ALLOW 4 WORKING DAYS FOR THIS REQUEST TO BE PROCESSED.**