

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

NAME: _____ I.D. # _____ SHOP: _____

CURRENT GRADE: _____ DATE OF BIRTH: _____ GRADUATION DATE: _____

YEARS ATTENDED: _____ GRADES COMPLETED: _____

ACT / SAT SCORES ON FILE IN GUIDANCE OFFICE: YES NO If scores are NOT on file in Guidance, please attach copy of Scores Report to this form.

Please prepare my transcript and include my college admission test scores for the following scholarship applications and/or for the undergraduate Admissions Office at the following colleges/universities:

<u>Date of Request</u>	<u>College / Scholarship Name</u>	<u># of Official</u>	<u># of Unofficial</u>	<u>Date Mailed</u>	<u>Date Student Picked Up</u>
_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____

DO YOU PLAN TO PARTICIPATE IN SPORTS AT COLLEGE? **YES** **NO** *If yes, please see Mr. Bassett.*

STUDENT SIGNATURE PARENT/GUARDIAN SIGNATURE

HOME ADDRESS: _____
PHONE # (Day): _____ (Evening): _____

NOTES: _____

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

NAME: _____ I.D. # _____ SHOP: _____

ACT / SAT SCORES ON FILE IN GUIDANCE OFFICE: YES NO

If scores are NOT on file in Guidance,
please attach copy of Scores Report
to this form.

Please prepare my transcript and include my college admission test scores for the following scholarship applications and/or for the undergraduate Admissions Office at the following colleges/universities:

<u>Date of Request</u>	<u>College / Scholarship Name</u>	<u># of Official</u>	<u># of Unofficial</u>	<u>Date Mailed</u>	<u>Date Student Picked Up</u>
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_____	_____	_____	_____	_____	_____

NOTES: _____

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