## TRANSCRIPT REQUEST FORM

Name	Student (	CHS ID #	Date
I needscholarships:	_(how many?) trans	cripts for the follo	owing schools and/or
1. (write in name of sc	hool, scholarship, etc. h	ere):	
Do you want it mailed?		If so, to what ad	dress?
2.			
Mailed?	Address?		
3.			
Mailed?	Address?		
4.			
Mailed?	Address?		
5.			
Mailed?	Address?		
Others (indicate all	the above requested	info please):	

PLEASE ALLOW 3-5 DAYS FOR ME TO RUN THESE FOR YOU!!!! (thanks)

After 3-5 days, please return to my office and pick them up in the indicated shelf slot or check to see that your request has been mailed.

(If you are requesting more than a transcript, please meet with me personally—thanks!)