



DEER LAKES HIGH SCHOOL

School Counseling Office
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Cheswick, PA 15024
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FORMER DEER LAKES HIGH SCHOOL GRADUATE TRANSCRIPT REQUEST/RELEASE FORM

Former Graduates of Deer Lakes High School requesting a copy of their transcript need to complete **all** of the information below. Once the form is complete, **return it along with a \$2.00 processing fee** (cash or check made payable to Deer Lakes School District – credit cards are **NOT** accepted) to the address at the top of this form. **Please allow at least 5 business days from the date we receive this form for your Transcript to be processed & sent.**

PLEASE PRINT LEGIBLY:

Your full name **at the time of graduation:** _____

Date of Birth: (MM/DD/YYYY) _____

Graduation Date: (month and year) _____ **NOTE:** If you just graduated from DLHS last year, you **DO NOT** have to pay the \$2.00 processing fee! Graduates get one calendar year from the date of graduation at no cost.

Home address: _____
Current! # & Street Name or P.O. Box City, State, & Zip Code

Phone # you can be reached at: _____

E-mail address you can be reached at: _____

Reason for request: (College/School, employment, etc) _____

ONLY ONE TRANSCRIPT REQUEST ALLOWED PER FORM - CHOOSE ONLY ONE OPTION BELOW: OFFICIAL OR UNOFFICIAL:

- Official** Transcript – will be signed & embossed with DLHS, school seal
NOTE: Official transcripts can only be sent by mail directly to the college/school/employer and NOT by fax or e-mail! If the sealed envelope is opened prior to reaching the addressee, the transcript is no longer "Official".

Name of College/School/Employer _____
Street Address or P.O. Box _____
City / State / Zip Code _____

- Unofficial** Transcript (will **NOT** be signed or embossed with school seal)
CHOOSE ONLY ONE OPTION BELOW:
- Will pick up Transcript **Please allow at least 5 business days – you will be notified when it is ready for pick up**
 - Mail **Unofficial** Transcript to me at my home address
 - E-mail **Unofficial** Transcript to: _____
 - Fax **Unofficial** Transcript to: _____

I hereby give permission to Deer Lakes High School to release my academic transcript to the college, school, company, person or agency identified above.

SIGNATURE: _____ **DATE:** _____

The Deer Lakes School District requires that a completed & signed "Former DLHS Graduate Transcript Request/Release Form" be filed with the school district prior to the release of an academic transcript for any student who graduated from Deer Lakes High School.