



DEER LAKES HIGH SCHOOL

School Counseling Office
163 East Union Road
Cheswick, PA 15024
Phone: 724-265-5320 x-2626
Fax: 724-265-5303

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) \_\_\_\_\_

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: \_\_\_\_\_