

WESTSIDE CHRISTIAN HIGH SCHOOL TRANSCRIPT REQUEST FORM

Name of Person Requesting: _____ **Date of Request:** _____

Transcript for: _____ **Graduation Year:** _____
Last First MI

I give WCHS permission to send a transcript with grades and SAT or ACT test scores to the organizations listed on this form.

Signature

Please include SAT test scores

Please include ACT test scores

Please upload to the Common Application site as soon as a request is sent to WCHS

Please upload to a college application site as soon as request is sent to WCHS

Additional Instructions? _____

Send to:

College/Organization	Method of Delivery (Circle One)	Address (email or postal address)
	Mail or Electronic	
	Mail or Electronic	
	Mail or Electronic	

****Please see the back to request additional transcripts**

Hard copy pickup at WCHS? Yes No **Number of hard copies needed:** _____

Email unofficial electronic copy to: _____

Office Use: Date Completed/Sent: _____ Recorded by: _____

Send to:

College/Organization	Method of Delivery (Circle One)	Address (email or postal address)
	Mail or Electronic	
	Mail or Electronic	
	Mail or Electronic	
	Mail or Electronic	
	Mail or Electronic	
	Mail or Electronic	
	Mail or Electronic	
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