## HIGH SCHOOL TRANSCRIPT REQUEST FORM

Please complete the following questions and submit by mail, email or fax to the address listed below. *The* graduates signature is required for processing. Allow up to 1 week for processing during September 1<sup>st</sup> – June 1<sup>st</sup>. Transcripts requested June – August are processed throughout the summer when staff is available. We will only send "official" transcripts to colleges and employers. *Please be advised that many colleges take up to* 4 weeks to process transcripts.

If you attended White Lake Area Community Education to finish high school, please contact them directly at 231-766-3001 to obtain your high school transcript.

Name:	_ Maiden Name:	
Graduation Year (required):	Phone (required):	
Did you attend White Lake Area Community Educa	ation/Alt Ed (Circle one): Yes No	
Signature (required):		_
Please send transcript to the following college or business:		
College/Company Name:		
College/Company Address:		
College/Company City, State, Zip:		
Company fax #:		

Please fax this completed and <u>signed</u> request to 231-893-2923 or e-mail request to <u>darcichristensen@whitehallschools.net</u>

or mail request to: Whitehall High School

Student Services-Transcript Request

3100 White Lake Drive Whitehall, MI 49461