TWINSBURG HIGH AND R.B. CHAMBERLIN HIGH ALUMNI TRANSCRIPT REQUEST FORM

IMPORTANT TRANSCRIPT INFORMATION - PLEASE READ

- All transcripts/records are \$2.00 each and can be mailed, picked up or faxed.
- Cash or money order (no personal checks) must be included with this completed form (money orders should be made payable to Twinsburg City Schools).
- Submit this form completely filled out and **SIGNED**. Please include the full address of the institution. Requests received without payment will not be processed and you will be notified by phone.
- Official transcripts/records sent to your home address should not be opened if you are planning on turning it in to an institution—if opened they become unofficial.

Mail this signed form and your payment to:

Transcript Request Twinsburg High School 10084 Ravenna Road Twinsburg, OH 44087-1719

Upon receipt of completed and paid request, please allow five (5) business days for processing. If you have any questions, please contact Amy Bennett (330)486-2406. ______ **ALUMNI TRANSCRIPT REQUEST FORM** All transcripts/records are \$2.00 each. I authorize Twinsburg High School to release the indicated information on this form to the institution listed below. **Student's Name (as it was while attending) Birth Date** Year of Graduation Name and Address of Person/Institution to receive transcript/record: (1 school per transcript form) PLEASE PRINT PLEASE NOTE: Colleges can take 2 to 3 weeks to process mail. Call the college to see if they have received your transcript before resubmitting your request. (Office Use Only)

Student's Signature:

Current Phone Number:_____ Email address:

Date Rcvd:

Paid: ______
Date Sent: _____

Date:_____