CAMPBELL HIGH SCHOOL GUIDANCE OFFICE

Transcript Request Form

FILL THIS OUT <u>COMPLETELY</u> AND BRING TO THE GUIDANCE OFFICE AFTER OR **SHORTLY BEFORE** YOU HAVE MAILED YOUR COLLEGE APPLICATION. SUBMIT THIS COMPLETED FORM, **ONE FOR EACH COLLEGE**. GUIDANCE WILL THEN SEND YOUR OFFICIAL TRANSCRIPT & LETTER OF RECOMMENDATION. **NOTE:** GUIDANCE WILL NEED *TWO WEEKS* TO **GUARANTEE** THE PROCESS OF THIS REQUEST.

	(Please Print <u>Neatly</u>)
STUDENT NAME	
COUNSELOR NAME	
COLLEGE/MILITARY BRANCH	
MAILING ADDRESS	
APPLICATION DEADLINE	
IF FOR COLLEGE, MAJOR APPLI	ED FOR
By signing this form, you are authorizing letter of recommendation to the above na	g Campbell High School to send your official transcript and guidance amed college.
	Student Signature
Date RECEIVED in Guidance	Date MAILED from Guidance
For Guidance Use only: Transcr	ript Guidance Form Profile