



Helena High School Transcript Request Form



Last Name

First Name

MI

(Maiden Name)

Date of Birth

Send to (*name of college and complete address required to process this request*):

1) _____

2) _____

3) _____

Additional schools/colleges listed on the back of this form

Please attach transcript request fee.

_____ \$3.00 (one copy)

_____ \$10.00 (unlimited copies)

_____ Student previous paid for unlimited copies

TEST SCORE POLICY

Standardized test scores are not included as a part of a student's transcript. Students will need to contact the testing agency directly to have test scores submitted to a college. It is the student's responsibility to ensure that test scores have been submitted to each college to which he/she applies.

It is with my full knowledge and consent that I authorize the release and/or exchange of my academic records with the schools, universities, or scholarship agencies listed above.

Student Signature

Date

*Parent/Guardian Signature

Date

** If a student is 18 years or older, he/she must give permission instead of parent or guardian.
Sec. 513, Title V. Public Law 93-380*

*****ALLOW 7-10 BUSINESS DAYS FOR REQUEST TO BE PROCESSEED*****