



TRANSCRIPT REQUEST FORM

Shelby County High School

101 Washington Street

Columbiana, AL 35051

Fax (205) 682-6605

OFFICE USE ONLY

Date Sent: _____

Mailed By: _____

Last Name First Name MI Date of Birth

FORMER STUDENTS:

Graduation Year (Maiden Name) Last 4 of SSN

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

1) _____

2) _____

3) _____

Additional schools/colleges listed on the back of this form

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, scholarship agencies, or employment 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/guardian. Sec. 513, Title V. Public Law 93-380

There is a \$5.00 processing fee for each transcript sent. Fee must be included with completed form in order for transcript to be sent.

*****ALLOW 5-7 BUSINESS DAYS FOR REQUEST TO BE PROCESSED*****

- Transcripts will not be processed on behalf of students who have any financial obligation or other types of holds to the school.
- Former students and alumni may only request official transcripts.
- Transcripts will not be faxed or emailed.
- Transcripts can also be requested electronically at <http://www.shelbyed.k12.al.us/schools/schs/transcripts.html> or at Needmytranscript.com