Student Transcript Request Form

Please fax completed form to (425) 385-4402 or e-mail to EHStranscript@everettsd.org
Requests may be made by phone by calling (425) 385-4415

Today’s date: Date needed by: Student #: 

First and Last Name:

Date of birth: Phone Number:

Current EHS student?  yes  no  (if no see below) Current Grade (circle one): 09 10 11 12

Official Transcript - # of copies needed: Unofficial Transcript - # of copies needed:

Pick up  Mail  EMail  Reason:  Scholarship  College application  Other:

Mail/Email to: (If college is out-of-state provide address please!)

If you are no longer an EHS student please also fill out the following:

(PRINT full/maiden name used at EHS):

Graduate: yes  no

Last year at EHS:

Transcripts will be available for pick up in the front office within 72 hours.

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