

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? <input type="checkbox"/> yes <input type="checkbox"/> 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 <input type="checkbox"/> Mail <input type="checkbox"/> EMail <input type="checkbox"/>	Reason: <input type="checkbox"/> Scholarship <input type="checkbox"/> College application <input type="checkbox"/> 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: <input type="checkbox"/> yes <input type="checkbox"/> no	Last year at EHS:

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

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