

Nottoway High School

OFFICIAL TRANSCRIPT REQUEST FORM

\$5.00 per copy

Faxed or mailed requests must include payment

Checks/money orders payable to Nottoway High School. DO NOT SEND CASH.

Last Name	First	Middle	Name while enrolled / PLEASE LIST ALL PRIOR NAMES
Address			SSN Number
City	State	Zip Code	Date of Birth
(____) _____ Daytime Telephone			Email Address
Graduation Date / Last Date of attendance			

_____/_____/_____
Student Signature *To protect your right to privacy, transcripts will NOT be released without your signature. DATE*

PLEASE INDICATE DELIVERY METHOD:

- Will pick up at the Nottoway High School Office
*Signed release required if transcript will be picked up by someone other than student.
 Transcripts picked up in person are addressed to the student and bear the stamp
 "Official Transcript Issued to Student in Sealed Envelope"*

- Mail to the recipient below
*Print complete name and address clearly.
 Delays may occur due to incomplete or illegible addresses.
 One copy will be mailed unless otherwise indicated.
 Attach a separate signed sheet if more than two recipients are requested.*

<p>For Mailed Transcripts: For Faxed Transcripts: Please send my official transcript to the following address:</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Please send my unofficial transcript to the following fax number:</p> <p>Attention to: _____</p> <p>Fax #: _____</p>
<p>Please send my official transcript to the following address:</p> <p>_____</p> <p>_____</p> <p>_____</p>	

Return completed request in person, mail or fax to:

Guidance Office · Nottoway High School
 5267 Old Nottoway Road Crewe, VA 23930
 PHONE: (434) 292-5373
 FAX: (434) 292-3021

<p style="text-align: center;"><u>For Guidance Office Use Only</u></p> <p>Date Sent: _____</p> <p>Initials: _____</p>
