

NORTH ALLEGHENY SENIOR HIGH SCHOOL

Attn: School Counseling Office
10375 Perry Highway
Wexford, PA 15090
724-934-7224

GRADUATE TRANSCRIPT RELEASE FORM

Please submit this form to request a transcript with \$3.00 (cash or check) and the graduate signature.

Allow 3 – 5 days for processing. PLEASE PRINT CLEARLY.

Name (at the time of graduation) _____

Year of Graduation _____ Date of Birth _____ Current Phone _____

Email address _____

Type of Transcript Requesting:

_____ **OFFICIAL TRANSCRIPT** (are imprinted with the school seal and must be mailed/emailed directly from North Allegheny HS to a school, place of employment or verification agency))

_____ **UNOFFICIAL TRANSCRIPT** (transcripts mailed to a home address, or handed to a student/former student are UNOFFICIAL and will be so marked)

Mail transcript to: _____

Name or college/university or employer

Street Address

City

State

Zip Code

Email transcript to: _____

(Please be sure the college or employer will accept emailed transcripts. This type of transcript will not have a raised school seal.)

I AUTHORIZE NORTH ALLEGHENY SCHOOL DISTRICT TO RELEASE MY TRANSCRIPT AS REQUESTED.

Graduate Signature

Date

Please mail form and fee to the above address OR drop off at the NA Senior High School.

For information only: cgalbraith@northallegheny.org