HIGH SCHOOL TRANSCRIPT REQUEST

Transcripts through 1989 are available at the Central Office.

Transcripts for graduates in 1990 to present are available at the system's high schools.

Graduate should request at the school from which he/she graduated.

By □ Mail □Phone □Fax □ E-Mail □@ Office Pulaski County

School District PO BOX 1055 SOMERSET KY 42502-1055			(Signature)
Date of Request.				
NAME				
(Last)	(First)	(Midd	ile)	•
MAIDEN NAME	DATE 0	F BIRTH	_//	
MAILING ADDRESS				_
PHONE NO. ()				
GRADUATION YEAR	SCHOOL			_
<u>OR</u> Last year attended	SCHOOL			
CHECK THE APPROPRIATE BOX: Transcript	to be picked up or to be	e mailed.		
□ PICK UP Date to Be I □ MAIL	Picked Up			
If the request is by mail, fax, phone, e-mail, requestee to receive the record requested, signature notarized.	, the Request Form may his/her request form mu	be mailed to requoust be signed by th	estee. For the e requestee and the	****
Notarized Signature of individual named in request. (NECESSARY ONLY IF REQUEST IS	block above signifying t NOT MAKE IN PERSON	hat he/she is the p @ THE OFFICE)	erson making the	
X		DATE		_
NOTARY	My Cor	nmission Expires _		
FOR OFFICE USE ON	NLY Pulaski County Boa	ard of Education Re	cord	
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