HOUSTON INDEPENDENT SCHOOL DISTRICT INACTIVE STUDENT RECORDS 4400 WEST 18TH STREET HOUSTON, TEXAS 77092-8501

HIGH SCHOOL TRANSCRIPT REQUEST FORM

Transcripts will be mailed via U.S. Mail. No transcripts will be e-mailed or faxed.

Name student used while in	<i>school</i> (e.g. ma	iden name of female stu	dent):
Last		First	Middle
Date of birth: Month	Day	Year	_
Social Security Number:			
Last high school attended in	HISD:		
Last year in attendance:		Did student gra	duate? () Yes () No
Any additional instructions?			
Complete address where tran	nscript is to be r	nailed:	
Local or toll free telephone i	number where y	ou can be reached:	
•	•		
Student Signature (current	name used)		Date
**Request must include a	copy of your va	did DRIVER'S LICEN	ISE or STATE ID CARD.
_	_	•	e paid envelope with the nailed requests do NOT
HISD			

Center for Inactive Student Records 4400 West 18th Street Houston, Texas 77092-8501

Or email form and scanned ID to transcripts@houstonisd.org
If you have further questions, call 713-556-6744 during office hours.

You may also get additional information by calling the Automated Request Line: 713-556-6780