



## Westside High School

### Transcript Request Form

*PLEASE ALLOW AT LEAST 3 DAYS*

**Transcript Fee: \$1.00 for each Transcript**

**Additional Documentation needed for:**

- DACA, COURT, etc. (plus \$1.00)
- Common App/Recommendations (plus \$1.00)

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

*Please Circle One:*      Current Student: Yes No      Grade Level: \_\_\_\_\_

WHS Grad: Yes No      What Year did you Graduate/Leave \_\_\_\_\_      Include Ranking Information: Yes No

**Name of College/ University/ Scholarship:** \_\_\_\_\_

**Address of Admissions Office/Scholarship: (Street/PO Box)** \_\_\_\_\_

(City, State, Zip) \_\_\_\_\_

Student Signature \_\_\_\_\_

Today's Date: \_\_\_\_\_