

REQUEST AN OFFICIAL TRANSCRIPT

1. Complete this form (please print neatly)
2. Include \$2 (two dollars) **for each transcript requested** (cash or a check payable to SHRHS)
3. Completed form and payment may be dropped off at the Guidance Office or mailed to:

Shepherd Hill Regional High School
Attn: Guidance Secretary
68 Dudley-Oxford Road
Dudley, Massachusetts 01571

Full Name (include middle initial): _____

Maiden Name (if applicable): _____

Date of Birth: _____

Year of Graduation: _____

Mail Official Transcript to (include contact person and address)

Signature: _____

Date Requested: _____

Date Mailed (office use only): _____

*For multiple transcripts, use the back side of this form to list additional contacts and addresses