



**JOHN PAUL II  
CATHOLIC HIGH SCHOOL  
TRANSCRIPT REQUEST FORM**



**Official transcript fee:** \$3.00 per transcript. Fee will be charged to student account.  
ALLOW 3-5 BUSINESS DAYS FOR PROCESSING FROM THE TIME REQUEST IS RECEIVED IN OUR OFFICE.

**Student Name:** \_\_\_\_\_ **Class of** \_\_\_\_\_

**Send transcript(s) to:**

1. College/University/Other \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
To the attention of: \_\_\_\_\_  
**Office:** Date sent \_\_\_\_\_ By \_\_\_\_\_ Rec'd \_\_\_\_\_

2. College/University/Other \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
To the attention of: \_\_\_\_\_  
**Office:** Date sent \_\_\_\_\_ By \_\_\_\_\_ Rec'd \_\_\_\_\_

3. College/University/Other \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
To the attention of: \_\_\_\_\_  
**Office:** Date sent \_\_\_\_\_ By \_\_\_\_\_ Rec'd \_\_\_\_\_

*(Please attach Transcript Request Form, Page 2, if additional transcripts needed.)*

**I request and authorize the release of my school records/transcript(s) to the colleges/universities/other listed above.**

\_\_\_\_\_  
**Parent's Signature**

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

(Required, if student is under 18 years of age.)

**TRANSCRIPT REQUEST FORM**

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*Please attach to TRANSCRIPT REQUEST FORM (Cover sheet with signatures)*

4. College/University/Other \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
To the attention of: \_\_\_\_\_  
**Office:** Date sent \_\_\_\_\_ By \_\_\_\_\_ Rec'd \_\_\_\_\_

5. College/University/Other \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
To the attention of: \_\_\_\_\_  
**Office:** Date sent \_\_\_\_\_ By \_\_\_\_\_ Rec'd \_\_\_\_\_

6. College/University/Other \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
To the attention of: \_\_\_\_\_  
**Office:** Date sent \_\_\_\_\_ By \_\_\_\_\_ Rec'd \_\_\_\_\_

7. College/University/Other \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
To the attention of: \_\_\_\_\_  
**Office:** Date sent \_\_\_\_\_ By \_\_\_\_\_ Rec'd \_\_\_\_\_