



MATTHEW E. HODGE, Ed.S.
PRINCIPAL

W. S. NEAL HIGH SCHOOL

801 ANDREW JACKSON STREET
EAST BREWTON, ALABAMA 36426
TELEPHONE (251) 867-4225
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Transcript Release Form Alumni

I give permission to W.S. Neal High School to release an official transcript to the following:

Student Name: _____

(Please provide name under which student (self) was enrolled, ex. Maiden name).

Date of Birth: _____ Date last attended/Graduation year: _____

Please Send my transcript to: _____

Address: _____

I have enclosed the \$5.00 transcript fee in the form of (please check one):

_____ Cash

_____ Money Order

_____ Check – Must be made out to WS Neal High School

(Check must contain name, address, Driver's License number, and 2 phone numbers)

Signature of Student/Alumni or Parent/Guardian

Date

How may we reach by you phone? _____

How may we reach you by email? _____