Ringgold High School

Principal, JR Jones

29 Tiger Trail Ringgold, Georgia 30736

> Telephone: (706) 935-2254 Fax: (706) 965-8910

\$2 fee for Transcripts

TRANSCRIPT REQUEST FORM

Full Name				
Last	First	Middle	(Maiden Name)	
Address				
Street Address		C	City, State, and Zip	
Home Phone Cell Phone _		Date of Birth		
Year of Graduation	OR 1	Date Last Attended		
	cials to release the second		Act of 1974, permission is ther requested information to	
Name of College/University		Address		
1.				
2.				
3.				
4.				
5.				
Signature of Student (REQUIRED)		Date of R	Request	
Transcripts can only be releas transcript will be mailed within			ndent's signature attached. The	
Signature of School Official		Date Sent		

Tyler Harper - <u>tharper.rhs@catoosa.k12.ga.us</u> Kim Sendele - <u>ksendele.rhs@catoosa.k12.ga.us</u>