

# Quitman Independent School District

## High School Transcript Request Form

This form is an interactive PDF form. This means you may complete this form online, but you must print it off and sign it before submitting. **We CANNOT process this form without your signature.**

### STEP 1: YOUR INFORMATION

Current Name (Last, First, Middle)		All Other Names Used		Student ID # / SSN	
Current Street Address (indicate if change of address)			City		State
					Zip Code
Phone Number	Year of Graduation or Years of Attendance			High School Transcript Program( if applicable)	
				Minimum DAP	Recomm N/A

### STEP 2: DESTINATION ADDRESS

Mail ____ (# of copies) to address:	Special Request
Mail ____ (# of copies) to address:	Special Request
Mail ____ (# of copies) to address:	Special Request

Fax # (if transcript is to be faxed): \_\_\_\_\_ Attn: \_\_\_\_\_

Note: Not all institutions accept faxed transcripts. Faxed transcripts are difficult to read and are UNOFFICIAL.

Name of individual authorized to pick up transcript (Photo ID required), if applicable: \_\_\_\_\_

### STEP 3: SIGN

Signature: (Required)	Date:	Send Transcript Request to: Quitman High School ATTN: Registrar 1101 E Goode St Quitman, TX 75783 <b>Fax: (903) 763-2589</b>
<p><b>Transcript requests may take up to 5 school days for processing. There is NO fee at this time.</b></p> <p>Please note: Transcripts sent directly to individuals will be UNOFFICIAL. Only those sent directly to an institution or employer are OFFICIAL.</p>		

### FOR OFFICE USE ONLY

Date Received:	Date Mailed or Faxed:	Picked up by:
_____	_____	_____
By:	Prepared by:	
_____	Mailed by:	