

# Lakota West High School

## *TRANSCRIPT REQUEST FORM FOR CURRENT STUDENTS*

In order to guarantee your transcript is received by the application deadline date, please observe the **ONE WEEK** processing time request by the Guidance Department.

Attach the official college counselor form to this request.

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

- ☐ I have **applied on-line**.

**Please send my official transcript to:**

School: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

- ☐ **Please send a mid year transcript to:**

School: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

- ☐ **Official** transcript for hand pick-up    Grade: \_\_\_\_\_

- ☐ **Unofficial** transcript for hand pick-up    Grade: \_\_\_\_\_

- ☐ Please send 1<sup>st</sup> quarter report card to:

School: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_