



# Port Charlotte High School

## Student Transcript Request

Date: \_\_\_\_\_

Legal: \_\_\_\_\_

Last

First

Middle

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student Number

Date of Birth

Year of Graduation

**Number of Transcripts Requested: (choose 1 from below:)**

\_\_\_\_\_ Official (3Max)

\_\_\_\_\_ Unofficial (3Max)

\_\_\_\_\_ Electronic (3Max)

College(s) **YOU** are mailing Transcripts to:

College(s) **PCHS** will send Electronically:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Transcripts going to the most schools in the state of Florida can be sent electronically. We will send them for you. **Transcripts going to any other schools must be mailed by you!** Transcripts will ready for pick up within 3 days after request is submitted.

\*If you are under 18 and have taken any AP courses or AICE course you will need the signature of your parent to process this request.

\_\_\_\_\_

\_\_\_\_\_

Parent Signature

Date

Please Return Form to the Registrar

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_