

**GRADUATE  
TRANSCRIPT / RECORDS REQUEST**

Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Phone # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Year of Graduation \_\_\_\_\_

Official Transcript \_\_\_\_\_ Unofficial Transcript \_\_\_\_\_

**TO WHOM SHOULD TRANSCRIPT BE SENT?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FEE: \$2.00 CASH \_\_\_\_\_ CHECK \_\_\_\_\_**

**SIGNATURE:** \_\_\_\_\_

Please note that *official* transcripts can only be sent to schools and places of employment. An *unofficial* transcript may be obtained by the student. Allow two weeks for processing. Please mail the form and the \$2.00 fee to:

Shaler Area High School  
Registrar's Office  
381 Wible Run Road  
Pittsburgh, PA 15209

Date Received: \_\_\_\_\_ Date Processed: \_\_\_\_\_