

# WHEATON NORTH HIGH SCHOOL-TRANSCRIPT REQUEST FORM

Registrar Office – One Falcon Way – Wheaton, IL 60187

**\$5 Per Request - Transaction Process Takes 7-10 Days**

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
I.D. # (HS students only)

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

(\_\_\_\_\_) \_\_\_\_\_  
Home Phone #

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Birth Date

## Transcript Sent To:

School/Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Deadline Date \_\_\_\_\_ (please circle) Official/Unofficial

Did You Apply On-line? YES NO

If No, Is Completed

Application Attached YES NO

### What Does This Application Require?

Check all that apply:

\_\_ Section to be completed by counselor

\_\_ Teacher recommendation(s) from:

1) \_\_\_\_\_

2) \_\_\_\_\_

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**NOTE: TO PROTECT STUDENT'S PRIVACY WNHS DOES NOT SEND ACT/SAT SCORES.** It is the student's responsibility to make sure appropriate scores are sent to the institution.

I, \_\_\_\_\_ (**signature required**) authorize the release of my school transcript to be sent to the above school, organization, or agency.

OFFICE USE ONLY: Paid \$ \_\_\_\_\_ Owes \$ \_\_\_\_\_ Date Mailed \_\_\_\_\_