



# TRANSCRIPT REQUEST FORM

Aiea High School

98-1276 Ulune Street

Aiea, HI 96701

(808) 483-7300

(808) 483-7303 FAX

Year of Graduation or Year(s) at AHS \_\_\_\_\_

Birthdate (mm/dd/yy) \_\_\_\_\_

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

First \_\_\_\_\_

Middle \_\_\_\_\_

Maiden \_\_\_\_\_

Current Street Address \_\_\_\_\_

Apt # \_\_\_\_\_

( ) \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Home Phone or Cell Phone \_\_\_\_\_

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

Date \_\_\_\_\_

Parent Signature (if student under 18 years of age) \_\_\_\_\_

Date \_\_\_\_\_

## Transcripts to Include: (check all that apply)

Please allow 3 - 5 days to process transcripts. Transcripts needed by: \_\_\_\_\_

all years attended

ACT scores

7 semesters (1st sem senior year)

SAT scores

6 semesters (end of junior year)

Others (specify): \_\_\_\_\_

### Cost of Transcripts:

\* Current High School students - No charge for first 2 transcripts. \$1.00 thereafter.

\* Graduates/Left AHS: \$2.00 per transcript

Number of Transcripts: \_\_\_\_\_

OFFICIAL \_\_\_\_\_

Mail to Address Below

Self Pick Up (will be in a sealed envelope)

UNOFFICIAL \_\_\_\_\_

Mail to Address Below

Self Pick Up

FAX \_\_\_\_\_

Faxed transcripts are considered unofficial

If mailing, submit **EXACT ADDRESS** where transcript(s) should be sent:

(College, Universities, Scholarship Organization, Business, etc)

Name and Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Fax number if faxing: \_\_\_\_\_

## OFFICE USE ONLY:

Received by: \_\_\_\_\_

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

Mailed Transcript on: \_\_\_\_\_

Amount Paid: \_\_\_\_\_