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TRANSCRIPT REQUEST

I, _____, Social Security Number _____,
Date of Birth _____, Year of Graduation _____, request Ravenswood
High School to release my high school transcript to:

Name of College(s) and or Business

Need address of Business or college

This will be an official transcript

If you would like a copy of your transcript sent to you.
This will be an **UNOFFICIAL** transcript.
Please mark how you want this transcript sent to you.

Mail _____ Mailing Address: _____

FAX _____ FAX Number: _____

FEEL FREE TO E-MAIL THIS COMPLETED TRANSCRIPT REQUEST TO THE
COUNSELING OFFICE SECRETARY.

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