

# BHS TRANSCRIPT REQUEST FORM

**MUST BE COMPLETED FOR EACH SCHOOL OR SCHOLARSHIP REQUESTING A HIGH SCHOOL TRANSCRIPT**

Fill out the BHS Transcript Request Form and return to the BHS Guidance Office along with the required \$2 transcript fee.

Each college application/scholarship application will tell you exactly what is required.

**It is the student's responsibility to contact the school to verify information was mailed and/or received by the college.**

**Student Name** \_\_\_\_\_  
Last First

**College/Scholarship Application Deadline Date** \_\_\_\_\_

Early Decision       Early Action       Regular Decision

**Please send a transcript to the following:**

Name of College /Institution \_\_\_\_\_

Address: \_\_\_\_\_

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

**I have submitted my application.**

Yes       No      *IF NO, I plan to submit my application on \_\_\_\_\_*  
Date

**I plan to send my application by:**

Mail       Online       Online using the Common Application

**I have sent my ACT/SAT/AP scores to the school listed above.** \*BHS does not send official ACT/SAT test scores.

*The transcript does include the highest SAT/ACT score earned. Notify the guidance office if you do not wish for these scores to be included.*

Yes       No      *To send official scores, please contact the testing organization*  
ACT: [www.act.org](http://www.act.org)    SAT/AP: [www.collegeboard.com](http://www.collegeboard.com)

**A counselor form is required.** *IF YES, please include a resume with this form.*

Yes       No      *IF YES:  the form is enclosed       the form is online*

**A counselor recommendation letter is required.** *IF YES, please include a resume with this form.*

Yes       No

**I have included the \$2.00 transcript fee – REQUIRED before information can be submitted.**

Yes       Check       Cash      *A fee is not required if the transcript is for a scholarship or the student has a fee waiver.*

**Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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## OFFICE USE ONLY:

Date turned in to BHS Guidance Office \_\_\_\_\_

Official Initials \_\_\_\_\_

Date Transcript was submitted \_\_\_\_\_

Official Initials \_\_\_\_\_

Online       Mailed

**If required:** Date Counselor Form/Letter was submitted \_\_\_\_\_

Official Initials \_\_\_\_\_

Online       Mailed