NEWBURY PARK HIGH SCHOOL MAILED_____

Request for Transcript *CASH ONLY*

Γo be:			
Mailed		Official – par	per copy - \$5.00
Delivered to counselor			
Picked up Pick up date:		_ Unofficial - fi	ree
Name:II)#	Date of Birth _	
Phone #: G	raduation Date:		
Mail To:	COLLEGE	:	
HOME:	ADDRESS:		
ADDRESS:	ADDRESS:		
CITY:ST:ZIP:	CITY:		
In Accordance with Public Law 93-380, Section 438, I hereby requ	uest the above school to releas	e or mail a transcript of m	ny credits earned.)
Signature		Date	
PARENT SIGNATURE REQUIRED IF UNDER 18			
FO	R OFFICE USE ONLY	<u>(14/ho)</u>	
Paid Done	Mailed	Picked up	
Complete form	below for addition	al transcript	
Reque	est for Transo	SCHOOL	MAILED
	est for Transe *Cash ONLY*		
	est for Transo *CASH ONLY*		
To be: Mailed	*CASH ONLY*	<u>cript</u>	per copy - \$5.00
To be: Mailed Delivered to counselor	*CASH ONLY*	<u>cript</u> _ Official – pap	per copy - \$5.00
To be: Mailed Delivered to counselor Picked up Pick up date:	*CASH ONLY* 	<u>cript</u> _ Official – pap _ Unofficial - fi	per copy - \$5.00 ree
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To be: Mailed Delivered to counselor Picked up Pick up date: Please PRINT Name: ID7	*CASH ONLY* #I	<u>cript</u> _ Official - pap _ Unofficial - fi Date of Birth _	per copy - \$5.00 ree
To be: Mailed Delivered to counselor Picked up Pick up date: Name: ID7 Phone #: Gra	*CASH ONLY* #I	<u>cript</u> _ Official - pap _ Unofficial - fi Date of Birth _	per copy - \$5.00 ree
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To be: Mailed Delivered to counselor Picked up Pick up date: Please PRINT Name: ID7 Phone #: Gra Mail To: HOME:	*CASH ONLY* #I duation Date: COLLEGE: ADDRESS:	<u>cript</u> Official - pap Unofficial - fr Date of Birth	per copy - \$5.00 ree
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To be: Mailed Delivered to counselor Picked up Pick up date: Please PRINT Pick up date: Name: ID7 Phone #: Gra Mail To:	*CASH ONLY* #I duation Date: COLLEGE: ADDRESS: ADDRESS:	<u>cript</u> Official - pap Unofficial - fi Date of Birth	per copy - \$5.00 ree
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