

## REQUEST FOR OFFICIAL HIGH SCHOOL TRANSCRIPT

## **PLEASE PRINT**

Name:					
First	Middle	Last			
Previous Name:					
First	Middle	Last			
Purpose: undergraduate school	olemploymentscholars	hiptransferother:	Explain		
Date of Birth:					
Graduation Year:					
Current Address:	Street	Aportmont	r I Init Namahar		
	Street	Apartment o	r Unit Number		
	Town	State	Zip Code		
Phone Number:					
	MAIL OR FAX A TRA	ANSCRIPT TO:			
Address:	Name of Institution/Emp	loyer			
	Street	Suite Number			
	Town	State	Zip Code		
Fax Number:					
Signature:	Date:				
Mailing Address:	Dawson County High School ATTN: Transcript Requests 900 North Merrill Avenue				
Phone Number:	Glendive, MT 59 (406) 377-5265	330			
FAX Number:	(406) 377-8206				

Transcripts are sent by first class mail. Certain users of transcripts, such as college admissions offices, require that transcripts be mailed directly to them and refuse hand-carried transcripts. Some users require validated envelopes, which we provide if requested initially.

We do NOT fax official transcripts. However, we do fax unofficial copies of academic records for students transferring to another school in the US for admission purposes, in addition to mailing official transcripts.