West Feliciana High School

P. O. Box 580
St. Francisville, LA 70775

School: (225) 635-4561
Fax: (225) 635-5588

Request for High School Records & Transcripts

Please allow 3 to 5 business days for processing.
ALL debts must be cleared before records are released.
A $5.00 Fee is required for records of students who are no longer enrolled.

Student's FULL Name while in school:_____

Date of Birth: _____ Date of Request _____

Current Name: _____ Date Graduated _____

Requesting: (check appropriate boxes)

□ High School Transcript only (personal use)
□ High School Transcript, ACT/SAT scores, class rank (College/other)
□ All Academic Records Available (Elem., Middle, High School)
□ Immunization Records Only
□ Birth Certificate
□
Other_____

Purpose of request:

□ Insurance
□ Scholarships
□ SSI or other State Social Services reason
□ College Admissions
□ Personal Record
□ Transferring Schools

When records are ready:

□ Call to Pick-up: Person to pick-up records & Contact Number:
_____

□ **Mail to:**
Name/Dept/Attention:_____
Address:_____

□ **Fax to:**
Name/Dept/Attention:_____
FAX Number: _____

Signature:_____ **Date:**_____

OFFICE USE: Fee Collected $_____ **Cash** _____ **Check #** _____
Date Received: _____ **Date Completed:** _____ **Office Signature:** _____

Home of the Saints