



## Grant High School Current Student Records Request

To request a transcript, ACT score, report card, or other document, complete this form and return to the designated box in the counselors' office. **Records will be delivered within 1 week after the date the request is received.**

Student's Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Needed Document(s):

\_\_\_\_ Transcript    \_\_\_\_ ACT    \_\_\_\_ Report Card    \_\_\_\_ Other \_\_\_\_\_

Method of delivery:

\_\_\_\_ Give to student

\_\_\_\_ Mail to this address:

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

\_\_\_\_ Fax to this number: (\_\_\_\_) \_\_\_\_\_

\_\_\_\_ Email transcripts to this email address: \_\_\_\_\_

Authorization to  
release:

\_\_\_\_\_  
Signature Date

Print Name: \_\_\_\_\_

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Office Use Only:

Date Received \_\_\_\_\_ By: \_\_\_\_\_  
 Date Processed \_\_\_\_\_ By: \_\_\_\_\_