

Current Student Record Request

Hononegah Community High School

- All documents must be picked up in the Student Support Services Office. No documents, transcripts, or applications, etc. will be mailed or faxed.
- Current HCHS students receive 5 transcripts at no charge.
- Following the 5th transcript, **there is a \$3 fee per transcript, payable at the time of request.**
- **READY FOR PICK UP IN 5 SCHOOL DAYS** - Please make requests in time to meet your deadlines.
- **Want your transcripts fast?** Don't forget you can request them from www.parchment.com and they will be electronically sent immediately (mailed or overnight within one business day) to anywhere you'd like (college, scholarships, yourself, etc.). Many destinations are free.

PLEASE PRINT LEGIBLY - You will receive an email to your HCHS google account when your documents are ready to be picked up.

Name: _____ Date: _____

Date of birth: _____ Graduation Year: _____ Student ID #: _____

_____ **Number of PAPER TRANSCRIPTS without TEST SCORES**

_____ **Number of PAPER TRANSCRIPTS with ACT SCORES**

_____ **Number of PAPER TRANSCRIPTS with SAT SCORES**

_____ **Number of PAPER TRANSCRIPTS with SAT & ACT SCORES**

_____ **Number of SAT SCORES requested**

_____ **Number of ACT SCORES requested**

***** MISCELLANEOUS ITEMS *****

_____ **GOOD STUDENT INSURANCE DISCOUNT***

_____ **DRIVE RIGHT FORM***

_____ **SOCIAL SECURITY PAPERWORK***

_____ **PRINCIPAL'S STATEMENT***

_____ **MISC. (PLEASE LIST)**

PLEASE NOTE: ALL RECORD REQUESTS NOT PICKED UP WITHIN THREE MONTHS OF THE ORIGINAL REQUEST DATE WILL BE DESTROYED AND A REFUND WILL NOT BE GIVEN FOR ANY REASON.

***Form must be attached to process request.**

Number of copies to be paid for: _____ Order total: \$ _____

Card Number: _____ **Exp. Date** _____ **Billing zip code:** _____

Card Holder Signature: _____

Picked up by: _____ Date: _____

FOR OFFICE USE ONLY			
			TOTAL: _____
Check #	cash cc	Total paid	Rec'd by
_____	_____	_____	_____