

OFFICIAL TRANSCRIPT REQUEST FORM

JOHN CARROLL CATHOLIC HIGH SCHOOL
GUIDANCE OFFICE
3402 DELAWARE AVENUE * FORT PIERCE, FLORIDA 34947
PHONE: (772) 464-5200 FAX: (772) 489-4259
www.johncarrollhigh.com

To have your official John Carroll High School transcripts sent:

Please submit this written request to the JCHS Guidance Office at the address or fax number noted above. There is a \$5.00 (per transcript) fee for sending transcripts. Please allow 3-5 workdays for processing. This fee should be included with the request and should be in the form of cash or personal check.

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- Please Note – No Transcript will be released until all obligations to JCHS are satisfied.***

Student Name _____ D.O.B _____
(Please Print) Last First Middle

Previous Last Name(s) – Maiden

Mailing Address _____

City, State, Zip _____ Telephone (____) _____

Dates of Attendance: From _____ To _____

Graduating Class of: _____

SEND TRANSCRIPT(S) TO: (Please print name and address)

- The only student pick-up of transcripts is for those going to IRCC. (Photo ID required for all pickups.)

I HEREBY AUTHORIZE THE RELEASE OF MY OFFICIAL TRANSCRIPT(S) AS NOTED.

Student Signature _____ **Date** _____