

TRANSCRIPT REQUEST FORM

WEST VALLEY HIGH SCHOOL

3805 Happy Valley Road Cottonwood CA 96022

Tel: (530)347-7171 Fax: (530)347-0481

Student: _____ Date: _____

Grade: _____ 10th _____ 11th _____ 12th **GRADUATED** _____
Year of Graduation

_____ I will return to pick up my transcript. I would like _____ copy/copies.

_____ Please send an official transcript and my work in progress to Shasta College.

_____ Please send an official transcript to the colleges listed below:

College: _____

City *State*

College: _____

City *State*

College: _____

City *State*

_____ Please send final transcript to above college(s)