## William S. Hart High School

## REQUEST FOR OFFICIAL TRANSCRIPT

Date of request:	
Student's full name:	
Any other names used (maiden):	
Date of birth:	
Graduate ( ) Non Graduate ( )	
Year graduated or last date attended:	
Purpose of the transcript:	
Address where transcript will be sent: Name:	
Daytime telephone number: (	)
Legal signature authorizing release of records <b>X</b>	
Number of copies requested: Official (se	raled) Unofficial
There is no charge for Official Transcripts used fo graduation. Official Transcripts for personal use, money order). Unofficial transcripts may be requestrar's Office during school hours. All transcr	or after one year of leaving, are \$3.00 (cash or
Send written request and payment to:	
Wm S Hart High School Attn: Registrar's Office 24825 N. Newhall Avenue	

Please allow 24-72 hours, after receipt of your payment, for request to be processed. For questions, call 661-259-7575, ext 129.

Newhall, CA 91321