North Middlesex Regional High School

Guidance Department
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ALUMNI TRANSCRIPT REQUEST

Requests are usually processed and your transcript sent in one to two business days. However, at certain times of the year there may be a slight delay due to the heavy volume of requests.

Please fill in **ALL** information completely. **A signature is required**. After completing the request, you can either: mail it, fax it, drop it off or scan it back into your computer and e-mail it to the guidance office.

Date:	Date of Birth:
Present Name:	Former Name:
Current Address:	
Graduation Date:	
SIGNATURE	
Check boxes that appl	Ve.
	School/Job or Name:
	Address:
	City:State:Zip:
☐ Fax to	
	Fax number MUST be provided. Most schools do NOT accept faxed transcripts as official.
☐ E-mail	to
│ │	r personal pick-up – Phone number to call when transcript is ready for pickup:
Complete the following	ng if someone besides yourself will PICK UP your transcript:
I authorize NMRHS to	release my transcript to:
Signature	Date
*Office Use Only []E-I	nailed
[] Faxed [] Mailed [] I	Pickup
Date:	