Salmon River High School Transcript Request Form

**Instructions:**

1. **Completely fill out the transcript request form and mail or deliver it to**:

Salmon River High School

PO Box 872 **Or**

Riggins, ID 83549 **Fax Requests to:** 208-630-6026

**Email Requests to**: cereghinos@jsd243.org

1. **NO VERBAL** requests will be processed.
2. **No requests will be processed June 10 through August 15.**



Date \_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Transcripts Requested \_\_\_\_\_\_\_\_\_\_\_

(Please Print Clearly)

Send to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When did you graduate? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Attention \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OR last attended Salmon River High School?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous/Maiden City/State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Send Transcript(s)**

City/State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ Immediately

\_\_\_\_\_ Hold transcript for pickup by requestor

**Type of Transcript needed:**

\_\_\_\_\_ Hold for pickup ***to be picked up by***:

\_\_\_\_\_ Personal

\_\_\_\_\_ NCAA #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ Official for Employment **Name (**Please Print Clearly)

\_\_\_\_\_ Official for College **(ID required to pick up)**

\_\_\_\_\_ Scholarship (sealed) # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ Military

Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR OFFICE USE: Date Request Received:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Transcript Sent:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_