

**McGregor High School**  
**Transcript Request Form**

Please fill out the fields below. We ask that you print neatly for the sake of legibility. Transcript requests that are illegible, incomplete, or lacking a legitimate signature will be not be processed. The transcript will contain a record of all courses completed and the grades received in those courses, along with class ranking. If your name has changed, please provide your maiden name or name as it was in high school.

**PLEASE ALLOW 5 BUSINESS DAYS TO PROCESS.**

**OFFICIAL Student Name:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Year of Graduation:** \_\_\_\_\_ **Contact Phone Number :** \_\_\_\_\_

If you are not a current student or did not graduate from McGregor High School, please provide the last date of your attendance: \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

Please provide the name of the institution WITH CORRECT ADDRESS to send transcript. Please use a separate form for each request.

\_\_\_\_\_ Self Pick-up

**NAME OF INSTITUTION/INDIVIDUAL:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**\*\*\*ANY STUDENT UNDER THE AGE OF 18 MUST ALSO HAVE A PARENT SIGNATURE  
FOR RELEASE OF EDUCATIONAL RECORDS\*\*\***

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**OFFICE USE ONLY**

**Date Request Received:** \_\_\_\_\_

**Date Transcript Mailed:** \_\_\_\_\_