



ATASCADERO HIGH SCHOOL Transcript Request Form

Today's date _____

Name _____ (use maiden name)
(Please provide the name you used when you attended Atascadero High School)

Signature _____

Date of birth _____

Phone number _____

Did you graduate from AHS? ___ Yes ___ No ___ Current Student

If yes, year of graduation _____

If no, last year attended AHS _____

Do you need an official or unofficial copy? _____
(Official copies are needed for colleges and many jobs)

Do you want the transcript **mailed** or do you want to **pick it up**? _____
Number of transcript requested _____

If you want your transcript mailed, please provide the following information:

- ❖ Name (Either your name or the name of the college/university)
- ❖ Street address
- ❖ City, State and Zip Code

** There is **no** charge for transcripts of current students.

***Please remit \$3.00 for **each** transcript requested. Make checks payable to Atascadero High School. Mail transcript requests to:

Atascadero High School
Attn: Cathy Bugg, Records
One High School Hill
Atascadero, CA 93422