

ROXBURY HIGH SCHOOL TRANSCRIPT REQUEST

Year of Graduation _____ **Student's Name** _____

(Please Print)

Counselor _____ **Student's Signature** _____

Application Deadline _____ **Parent's Signature** _____

(For Students under the age of 18)

Today's Date _____

Please send a **transcript** of my high school record to the following:

NAME OF SCHOOL or SCHOLARSHIP:

School application done on line

Applying:

Common application done on line

Early Decision

My application is attached

Early Action

Fee attached Yes No

Rolling

Transcript needed for scholarship

Regular Decision

STANDARDIZED TESTS SCORES NOT INCLUDED WITH TRANSCRIPT

Rev. 10/2011

For Office Use Only		
To Naviance _____	Via EDocs _____	Via Mail _____