

DATE _____

NEWBURYPORT HIGH SCHOOL RECORD RELEASE

PLEASE PRINT

STUDENT NAME _____

DATE OF BIRTH _____ DATE OF GRADUATION _____

There is a \$5.00 charge per transcript – make checks payable to Newburyport High School for the proper amount.

PLEASE SEND TRANSCRIPT TO:

WHERE _____

STREET _____

CITY, STATE, ZIP _____

ADDITIONAL TRANSCRIPTS:

WHERE _____

STREET _____

CITY, STATE, ZIP _____

WHERE _____

STREET _____

CITY, STATE, ZIP _____

STUDENT SIGNATURE _____

PARENT/STUDENT REQUESTING SEALED OFFICIAL TRANSCRIPT

OF COPIES TO BE PICKED UP _____ (Please note parents may only pick up one copy)

PARENT/STUDENT SIGNATURE _____

NOTE: 1) Your parent may not release your transcript after you turn 18
2) Recipients may not consider a transcript “official” unless mailed directly from Newburyport High School

Processing time is three (3) to five (5) business days. Processing time is subject to change.