

Catasauqua High School

2500 W. Bullshead Road
Northampton, PA 18067-8805
Guidance Telephone 610-697-0123

High School Transcript Release Form

Please note the following information carefully!
This form must accompany all transcript requests – no exceptions.
Official transcripts must be mailed directly to an educational institution or business.
This document will include both a counselor's signature and the school seal.
Transcripts mailed to you personally will be designated as unofficial.
All faxed transcripts will be sent as unofficial.

Name: _____

Maiden Name (if applicable): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____

Class of _____ Graduated: Yes ___ No ___ Date of Birth: _____

My signature below certifies that I have granted permission to have my school records released to:

Name of School/Business: _____

Person/Department: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ - _____ - _____ Fax: _____ - _____ - _____

Signature: _____ Date: _____

Instructions:

1. You must include a business size envelope (4 ½" by 9 ½") addressed to the place where the transcript is to be mailed. Do not include your return address on the envelope.
2. Attach one postage stamp.
3. Enclose a processing fee for each transcript **\$2.00 CASH ONLY – No checks or money orders.**

For Guidance Office Use Only

Date Received: _____

Fee Paid: _____

Processing Date: _____

Transcript Requested: Official Unofficial

Information released by: Mail Fax Other: _____

Please allow 7 to 10 days for processing this request.