

Pine Bluff High School

Transcript Request for a College

Name of Student _____ Date of Request _____

Counselor,

I. Please send the following information to the college listed. Check all that apply.

☐ Transcript

☐ Letter of Recommendation

☐ ACT Scores

☐ Final Transcript

Due date _____

II. Name of College *(student must complete this part)*

Name of College _____

Address of College _____

City, State & Zip Code _____

III. Name of Scholarship *(complete only if applying for a scholarship)*

Name of Scholarship _____

Address of Scholarship _____

City, State & Zip Code _____

IV. Was your college application or scholarship application completed online?

☐ Yes

☐ No

Application(s) are to be mailed by what date? _____

**** Counselors must mail your official transcript.**

Student's Signature

First two transcripts are free
Additional transcripts fee \$2.00 each
Transcripts for scholarships are free

Office Use Only:

Processed ☐ Yes ☐ No

Date: _____

By: _____