

## **BHS Transcript Request Form**

Date Requested:		<del>_</del>
Name you Graduate	d Under	
Birth Date:	Grade:	Year Graduated:
Please check one of	-	
Unoffici	al Transcript (You may make	unlimited copies of an unofficial transcript)
Official	Transcript (An official transcr	ipt is stamped and sealed)
Send to:		
Student Signature:		
Jeanethe Jigharahe		

Please attach a Driver's License if you want your transcript sent or emailed directly to you. You can email this form to:

Last Name (A – M) <a href="mailto:lcrouch@bisdtx.org">lcrouch@bisdtx.org</a> Last Name (N – Z) <a href="mailto:sgonzalez@bisdtx.org">sgonzalez@bisdtx.org</a>