

Each Transcript \$5 x _____

Total Cost _____

THOUSAND OAKS HIGH SCHOOL

TRANSCRIPT REQUEST

\$5.00 fee for each transcript requested

This form is used by both current and former students.



Date _____ Birth Date _____ Name: _____

Name at graduation (if different): _____

Cell # (_____) _____ Counselor (current students) _____

Payment options: ___ Cash ___ Money Order ___ Check* ___ Credit Card* (**only current/active students*)

Address: 2323 N. Moorpark Rd. Thousand Oaks, CA 91360 Attn: Transcript Request

Current students—For those transcripts that cannot be sent electronically, or I don't provide an address, I understand it is my responsibility to **pickup** my transcript.
Initial _____

I am a former graduate.
Enter grad year.

Grad year

Office use only:

Pickup (paper): _____ eDocs: initial ___ midyear ___ Date completed: _____ by: _____

Sent	College Admissions Address or address where transcript should be sent (If not being submitted electronically, please add address.)	Type
_____	1. _____ Deadline _____	<input type="checkbox"/> Initial <input type="checkbox"/> Midyear
_____	2. _____ Deadline _____	<input type="checkbox"/> Initial <input type="checkbox"/> Midyear
_____	3. _____ Deadline _____	<input type="checkbox"/> Initial <input type="checkbox"/> Midyear
_____	4. _____ Deadline _____	<input type="checkbox"/> Initial <input type="checkbox"/> Midyear
_____	5. _____ Deadline _____	<input type="checkbox"/> Initial <input type="checkbox"/> Midyear
_____	6. _____ Deadline _____	<input type="checkbox"/> Initial <input type="checkbox"/> Midyear
_____	7. _____ Deadline _____	<input type="checkbox"/> Initial <input type="checkbox"/> Midyear