

CENTRAL HIGH SCHOOL • Transcript Request Form

NOTE: If a parent wishes to complete the form, it must be completed by the custodial parent. A parent <u>may not</u> complete the request form if the student is 18 years of age.

	Last Name _	First Name		Class of 20
	Age	Birthdate	Phone Number _	
	Date Submitted	to Counseling Office:	Date Needed	d by:
		Are you applying via C	ommon App? Yes _	No
	Colleg	ge (or Employer):		
	Addre	ess:		
spe syst	cifically requeste em for us to sen	d by the student as marked in the	ne space below. Previous gradua	s scores such as ACT <u>are not</u> sent unless tes' test scores may not be accessible in the vw.collegeboard.org) directly to arrange for
the		ores to your college.	For those	applying via Common App:
		, AP Test Results		Secondary School Report
	•	y of current schedule		
	Scho	ool Profile		Mid-Year Report
	Oth	er:		
TO T	THE COUNSELOR TER !! C quest that the CH uest that, if requi	ounselor Recommendation S Counseling Office mail to the incred, the Counseling Office submit	e OF WHEN IT NEEDS TO BE SUBN Institution named above my officia	NTS MUST SUPPLY A "Student Profile Sheet" MITTED IF YOU NEED A RECOMMENDATION all transcript and/or test scores. I further f my application. I understand that this tent.
	dent Signature ase allow 5 busine	ss days to process your request (14 o	days if requesting counselor recommo	endation and/or secondary school report).
		Central has transcripts for gradua s Management at 865-215-5657.		003 and earlier graduates must contact
Cen	tral High School (Counseling, 5321 Jacksboro Pike,	Knoxville, TN 37918. School hour	•
*** Dat	************ e and Initial when comp	**************************************	**OFFICE USE ONLY********	***********
	Transcript of	courses and grades	School Profile	Mailed
	ACT, AP Test		Counselor Recommendation	completed
	Copy of curre	ent schedule	Other:	