

**THE NEW YORK CITY DEPARTMENT OF EDUCATION
MARTIN VAN BUREN HIGH SCHOOL**

230-17 Hillside Avenue
Queens Village, NY 11427
Tel: (718) 776 - 4728
Fax: (718) 776 - 6807
Web: thenewmb.com

TRANSCRIPT REQUEST FORM / JOB VERIFICATION

FEE: \$5.00 Money Order – Payable to MARTIN VAN BUREN HIGH SCHOOL
(NO CASH – NO PERSONAL CHECKS)

**** THIS YEAR'S GRADUATES DO NOT PAY ANY FEE ****

Please print clearly.

Name of Student: _____

Name of Student if different when attending school: _____

Date/Year Graduated or Discharged: _____

Date of Birth: _____

Social Security No.: _____

Telephone No.: _____

STUDENT'S SIGNATURE: _____

Please check (X) the document being requested:

Mailed ONLY to Colleges/Universities/Employers directly:

OFFICIAL TRANSCRIPT (\$5.00 Money Order)

An official transcript bears the seal of the school and an authorized signature

Name of College/Employer: _____

Address of College/Employer: _____

(Use the back of this form for additional Colleges/Universities/Employers)

Mailed directly to Student's address:

GRADUATION LETTER (\$5.00 Money Order)

IMMUNIZATION RECORD (\$5.00 Money Order)

UNOFFICIAL TRANSCRIPT – STUDENT COPY (\$5.00 Money Order)

Student's Address: _____
