

Official Transcript Request

Ardmore High School



Instructions:

Please provide us with the name you used in high school. In addition, please include a copy of your photo identification to this request. If you did not graduate, please enter the year that you would have graduated.

Mail your request to Ardmore High School, PO Box 1709, Ardmore, OK 73402 or by fax to 580.221.3012. For more information, call 580.226.7680.

<p>Name: _____ DOB: _____</p> <p>Year of Graduation? _____ <input type="checkbox"/> Did Not Graduate</p> <p>Where would you like for us to send your transcript?</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Name: _____

Address: _____

Email Address: _____ Phone Number: _____

For Official Use Only

Date of Request: _____ Date Transcript Mailed: _____

Processed By: _____