REQUEST for an OFFICIAL TRANSCRIPT

To request an official transcript, print the form below, fill out the information and submit to:

WEHS, Attn: Registrar Office 3000 Wylie East Drive, Wylie, Texas 75098, Fax 972-442-2874

Please allow <u>up to 3 days</u> for transcripts to be printed or mailed. District policy states <u>no</u> transcripts will be emailed/faxed.

emailed/faxed.						
Last Name - Print	First Name - Print		Middle Initial Date of Birth		Date of Birth	
Phone # & email you can be reached at:						
Are you a current student at WEHS?	Yes	No	Current Grad	e Level?		
Did you graduate from WEHS?	Yes	No				
What year did you graduate?						
Your last name if different than above.						
Your Signature Above		Student ID# Above		Today's Date		
Reason for transcript request:		Student ID# Above		Today 3 Date		
Reason for transcript request.						
ONLY REQUEST TRANSCRIPTS AFTER YOU HAVE APPLIED TO THE COLLEGE						
MAIL TRANSCRIPTS TO						
Name:(University, Business, etc.)		Name:	Name:			
			(University, Business, etc.) Attn:			
Attn:		Attii.				
Address:		Address:				
City, State & Zip City, State & Zip						
Name:(University, Business, etc.)	Name:(University, Business, etc.)					
Attn:						
Address:		Address:				
City State & 7in		City State & Zin				
City, State & Zip City, State & Zip						
REQUEST TO PICK UP TRANSCRIPTS						
Number of Transcripts Requested:						
Transcripts will be picked up by self - Check Here						
Transcripts to be picked up by another person - Name of person picking up						

For Office Use Only

Date Processed: _____ By: _____