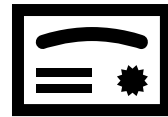


ASHLAND HIGH SCHOOL

CURRENT STUDENT

Transcript Request Form



Please allow up to 5 days for the request to be processed.

Student Name (while attending school)				
Today's Date	Grade	Date of Birth	Contact Phone	Contact Email Address
Official	Unofficial	School, Scholarship or Program to receive transcript		
Is this for an OSAC application? (you must register on their website first)				

Please do the following with my transcript:

	Mail it directly to the college
	Hold it for me to pick up in the main office
	Call me when it is ready at this number
	Email me it to me at this email address
	Mail it to me at this address

Mail this form to:
 Ashland High School
 201 S. Mountain Ave.
 Ashland, OR 97520

OR

Call 541 482 8771 x 2100 to pay by credit card

Office Use	
Amount Due	
Perm Rec	
Paid	
OSAC	
Date Mailed	

You may also email questions and requests to the registrar:
Janet.Villanueva@ashland.k12.or.us