

**HUNTINGTON HIGH SCHOOL
Huntington, New York 11743**

Transcript Request Form

*Please note that this form is only for former students.
Current students may obtain a copy of their transcript from their
guidance counselor.*

If sending via fax, send form to (631) 425-4730.

Please allow up to three (3) business days for request to be processed.

Student's Name:	
Student's Phone #:	
Date of Birth:	
Year Graduated	

Please check box below:

- I will pick up the transcript**
- Please send transcript to:**

Institution Name:
Address:
Zip Code:
Phone:

FOR OFFICE USE ONLY
DATE RECEIVED:
AUTHORIZED BY FORMER STUDENT BY PHONE: (Circle One) YES NO