

MOSS POINT HIGH SCHOOL

Office of Guidance, 4924 Church Street, Moss Point, MS 39563
Phone: (228) 475-5058 ext. 5007 ~ Fax: (228) 475-5074

TRANSCRIPT REQUEST FORM

THIS FORM MUST BE COMPLETELY FILLED OUT BEFORE IT CAN BE PROCESSED

Please check one of the following options.

- I am currently enrolled at Moss Point High School. I will graduate in _____.
- I am a former student of Moss Point High School. I graduated in _____.
- I dropped out of school and did not graduate from Moss Point High.

PERSONAL INFORMATION

Name _____
First Middle Last Maiden

Date of Birth _____ SSN _____

Phone Number _____ Cell _____

Please check one box. I will pick up Please mail to me at address below

PLEASE FORWARD A COPY OF MY TRANSCRIPT TO THE ADDRESS BELOW.

Name of College or Business

Mailing Address

City State Zip

PLEASE SEND THIS TRANSCRIPT

- As soon as possible After the final grades are posted at the end of the year

THE REASON FOR THIS TRANSCRIPT IS Employment College Other

I am requesting _____ Unofficial Transcript(s).

I am requesting _____ Official Transcript(s).

There is a \$3.00 charge for each transcript. If transcripts must be mailed or faxed by the school, an additional fee of \$2.00 per copy will be charged. For current high school students there is no charge.

Signature if 18 or older. If under 18, parent or guardian must sign.

FOR OFFICE USE ONLY. DO NOT WRITE IN THIS AREA.

Amount paid \$ _____ Receipt # _____ Date _____

Date transcript was completed and sent _____ Initials _____