

TRANSCRIPT REQUEST

Full Name: _____
(Last) (First) (Middle) (Maiden)

Date of Birth: _____ School Attended: _____ Did You Graduate? _____
(yes/no)

If No: Date Left: _____ Graduation Date: _____
(Month/Year)

Telephone Number: _____ Email Address: _____

There is a \$3.00 processing fee

For transcripts from **Heritage High School, Porter High School, Everett High School, Walland High School, or Townsend High School**, complete this form and mail with processing fee to:

Heritage High School
3741 E. Lamar Alexander Parkway
Maryville, TN 37804
Attn: Guidance Office/Transcript Request
865-984-8110 (phone) 865-681-2551 (fax)

For transcripts from **William Blount High School, Lanier High School, or Friendsville High School**, complete this form and mail with processing fee to:

William Blount High School
219 County Farm Road
Maryville, TN 37801
Attn: Guidance Office/Transcript Request
865-984-5500 (phone) 865-980-1181 (fax)

A copy of transcript is to be:

- () Picked up within five days
- () Faxed to the following number: _____
- () Mailed to the address/college/university/ vocational school, etc, listed below: *(please list name and address)*

I request that Blount County Schools release my school transcript/records

(Signature of Applicant)

(Today's Date)

For Office Use Only:

\$3.00 fee paid by: Cash () Check ()
Records were: Mailed () Picked up by Applicant () Faxed () Date: _____