

TRANSCRIPT REQUEST FORM

Use this form to request your Penn Manor High School academic records

Please release a transcript (s) for:

\_\_\_\_\_  
Last(Name used in High School) First Middle Age Year of Last Attendance

\_\_\_\_\_  
(date of birth)

**(Note: Transcripts do not include test scores from any PSAT, SAT, Pre-ACT or ACT tests.)**

Please list **where transcript should be sent:**

Institution/Name of Recipient:\_\_\_\_\_

Address:\_\_\_\_\_

\_\_\_\_\_  
Email address of Recipient:\_\_\_\_\_

Phone Number of Recipient:\_\_\_\_\_

Fax Number of Recipient:\_\_\_\_\_

\_\_\_\_\_  
Institution/Name of Recipient:\_\_\_\_\_

Address:\_\_\_\_\_

\_\_\_\_\_  
Email address of Recipient:\_\_\_\_\_

Phone Number of Recipient:\_\_\_\_\_

Fax Number of Recipient:\_\_\_\_\_

**I understand that it is my responsibility to ensure that my transcript was received, properly processed and filed to any institution requested.**

Signature\_\_\_\_\_ Day phone\_\_\_\_\_

Parent signature (only if under 18)\_\_\_\_\_

Today's date\_\_\_\_\_

**The counseling office staff is not responsible for the completion of transcript, applications or scholarship forms unless received at least 10 SCHOOL DAYS before the deadline.**

RETURN THIS FORM TO: COUNSELING OFFICE, PENN MANOR HIGH SCHOOL  
P. O. BOX 1001, MILLERSVILLE, PA 17551-0301  
PH: (717) 872-9520 FAX: (717) 842-2029  
Email: [dianna.lowe@pennmanor.net](mailto:dianna.lowe@pennmanor.net) or [pj.peters@pennmanor.net](mailto:pj.peters@pennmanor.net)