



Grafton High School



Counseling Department

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Official Transcript Request Form

Cohort (*graduation year*): _____ **Date Sent** (*Office use only*): _____

Last Name: _____ **First Name:** _____

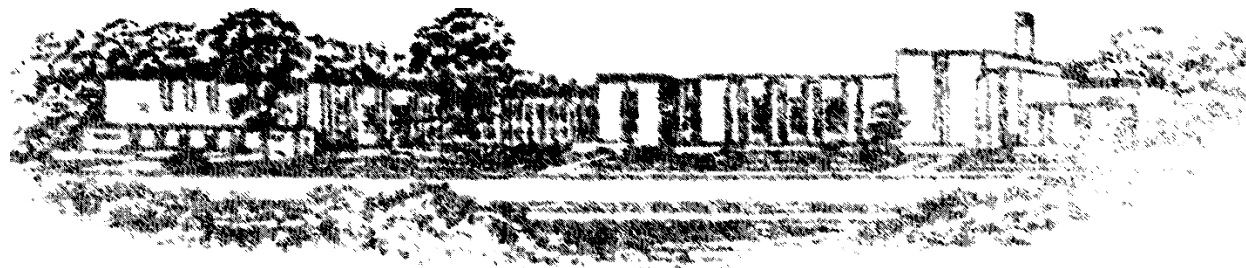
Please send my records to the following recipient(s):

I hereby authorize GHS to release official transcripts, including coursework, grades, grade point average, class rank, and/or test scores.

Parent Signature: _____

Or, check here if the student is 18 or older: ☐

Student Signature: _____



*Please note that the West Virginia Department of Education has stated that schools no longer send immunization records. This is different from years past. The burden now rests with students and their families.

After high school, my primary plans involve *(please check all that apply)*:

- ☐ job/employment
- ☐ military
- ☐ technical school
- ☐ 2-year or associate degree college program
- ☐ 4-year/bachelor's degree college program
- ☐ master's degree college program
- ☐ doctoral or professional degree college program

If you plan on attending a college, university, or technical school after graduation, please specify which school you plan on attending. If undecided, say so.

Please specify your intended major or focus area. If undecided, say so.

What career or occupation do you hope to ultimately have?

Please fill in below if you are a technical school and/or UTC completer by writing in the specific name of the program you completed (for example, do not put in "ag", but instead be specific by saying "Plant Systems" or "Agribusiness Systems"). There are multiple lines for those students who are dual or triple completers:

The state requires the school to complete a placement report. For this purpose, we will need your updated contact information:

Phone: (_____) _____ - _____ Email: _____

Mailing address: _____

Please double check to make sure both sides are complete; then give to your counselor.