

**TRANSCRIPT REQUEST FORM
OLD FORT LOCAL SCHOOLS**

NAME: _____
(Print) Last First Middle/Maiden

TODAY'S DATE: _____ BIRTHDATE: _____

ADDRESS: _____

CITY, STATE: _____ ZIP: _____

PHONE NO.: _____

SIGNATURE: _____
(Must have signature or transcript cannot be sent)

SOCIAL SECURITY NO.: _____

GRADUATION DATE: _____

LAST DATE OF ATTENDANCE: _____

MAIL TRANSCRIPT TO:

or

WILL PICK UP TRANSCRIPT ON (DATE): _____

- ◆ **PLEASE NOTE: ALL FINANCIAL OBLIGATIONS MUST BE MET BEFORE TRANSCRIPT WILL BE PROCESSED.**
- ◆ Former Old Fort students will be charged \$2.00 per transcript (\$1.00 for each additional ordered at the same time); this fee is subject to change at anytime. Make checks payable to Old Fort Schools. ***Current Old Fort students will not be charged.***
- ◆ Please allow five (5) working days for processing (15 days at end of semester). ***During the summer months, transcripts may not be processed in a timely manner.***

Transcript requests can be sent to:
ATTN: Guidance Office
Old Fort Schools
7635 N. Co. Rd. 51
Tiffin, OH 44883

FOR HIGH SCHOOL USE:
Fee Due: _____ Amount Paid: _____
Clerk: _____ Date Sent: _____