

# Bolton High School

## Transcript Request Form

Please fill out the form below with all the requested information  
and return to *guidance@boltonct.org*.

### PERSONAL INFORMATION

Current Name: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Former Name(s): \_\_\_\_\_

### MAILING INSTRUCTIONS

Type of Transcript:    ☐ Official    ☐ Unofficial                      Quantity: \_\_\_\_\_

Send to the Following Addresses:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Please read the following statement and type your name and date on the line below.**

I hereby grant and authorize the right for the Bolton High School Guidance Department to  
obtain my transcript and send it to the institution(s) listed above.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

### For Office Use Only

Date Received: \_\_\_\_\_ Date Given: \_\_\_\_\_

Via: \_\_\_\_\_ Guidance Staff Initials: \_\_\_\_\_