

Leilehua High School 1515 California Avenue, Wahiawa, HI 96786 :: 808.305.3101

Final Transcript Request

Please deliver or mail your request to the Registrar's Office. A picture ID is required upon submittal and/or pick up.

Print full name used	l as a student at	Leilehua High School:
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Last Name	First Name			Middle Name	
Date of Birth:////		Graduation Year:			
I hereby give consent for the transfer of a	ademic r	ecords (check one):		
OFinal transcript, inlude:	s all grad	des 9-12 <i>(TO BE</i>	SENT TO 1 SCHO	OOL ONLY)	
Include Test Scores on transcript:	○No	or			
Signature of Student (18 yrs or older)/Requestor		Sig	nature of Parent/Guardian	(if student is under 18 yrs. old)	
Date of Request:		_ Contact P	hone Number:		
Process Type	Cost	t per Record	# of Records	Subtotal	
Regular (allow 5 business days from the date request is received)	\$2.00*				
Expedite/RUSH (requests recieved by 3pm will be sent to the post office/counselor by the next business day)	\$4.00*				
	*Cash or money order only		TOTAL COST		
For Unofficial Copy (Transcripts provided following manner will be considered UNOFFICAL		For Official Official transcri		from Leilehua High School.	
Select transfer option: (copy of picture ID must accompany request)			Name and Mailing Ad		
Fax Number: To be picked up by Student/Requestor Counselor: For School/Organization: (UH Manoa, NCAA, Scholarship)		organization to which transcipt is to be sent. *PRINT or TYPE legibly below,			
		this will go in the	window envelope	Sample: Leilehua High School	
				Attn: Admissions Office 1515 California Avenue	
				Wahiawa, HI 96786	
Are you using the Common Application (commonapp.org) to apply to colleges?					
OYES ONO					
If Yes, then see counselor for approval					
Counselor Signature					