Leilehua High School

1515 California Avenue, Wahiawa, HI 96786 :: 808.305.3101

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 as a student at Leilehua High School:

Last Name

First Name

Middle Name

I hereby give consent for the transfer of academic records (check one):

- O All semesters to date, includes all grades from 9th to the date of this request, available now
- igodot 6 Semesters, includes all grades 9-11, available after June of Junior Year
- O 7 Semesters, includes all grades 9-11 and first semester of grade 12, available after January of Senior Year

or

Include Test Scores on transcript: OYes ONo

Signature of Student (18 yrs or older)/Requestor

Signature of Parent/Guardian (if student is under 18 yrs. old)

Date of Request: _____

Contact Phone Number: _____

Graduation Year:

Process Type	Cost per Record			# of Reco	ords	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 on			TOTAL CO	OST	
For Unofficial Copy (Transcripts provided in the following manner will be considered UNOFFICAL) Select transfer option: (copy of picture ID must accompany request) Fax Number: To be picked up by Student/Requestor Counselor: For School/Organization: (UH Manoa, NCAA, Scholarship) Are you using the Common Application (commonapp.org) to apply to colleges? OYES NO If Yes, then see counselor for approval			Official transcrip Print complete organization to *PRINT or TYPE I	For Official Copy Difficial transcripts are mailed directly from Leilehua High S Print complete Name and Mailing Address of school or organization to which transcipt is to be sent. PRINT or TYPE legibly below, his will go in the window envelope Leilehua High Sch Attn: Admissions C 1515 California Ave		Idress of school or e sent.