



OCONTO UNIFIED SCHOOL DISTRICT

“Leaders & Learners . . . Today & Tomorrow”

REQUEST FOR OFFICIAL TRANSCRIPT

STUDENT NAME: _____ MAIDEN NAME: _____

YEAR OF GRADUATION: _____ YEAR LAST ATTENDED: _____
(IF NO GRADUATION DATE)

SEND/GAVE TRANSCRIPT TO:	SEND TRANSCRIPT TO: (2 nd request)
_____	_____
_____	_____
_____	_____

Other information or instructions regarding this request _____

SIGNATURE: _____ DATE: _____

The Oconto High School transcript includes: records & grades of high school classes taken, GPA, class rank and ACT/SAT test scores (if taken).
Request form can be emailed to debi.shufelt@oconto.k12.wi.us, or faxed to: 920-834-7804, Att: Debi.