



**Franklin High School**  
**Counseling Center**  
810 Hillsboro Road  
Franklin, TN 37064

## Transcript Request Form

**A fee of \$1.00 is required to process transcript requests.**

**Please check the box that indicates how this transcript is to be processed.**

**Mail**                       **Fax**                       **Pick-Up**

<b>Date of Request:</b>	
<b>Full Name:</b>	
<b>Maiden Name (if applicable):</b>	
<b>Date of Birth:</b>	
<b>Daytime Phone Number:</b>	
<b>Year of Graduation or Last Attendance:</b>	
<b>Name and Address of Institution to Which the Transcript Will Be Sent:</b>	
<b>Fax Number:</b> Only needed if the transcript is to be faxed.	

**The transcript will be marked to the attention of the admission office of the listed institution unless otherwise requested to be sent to a different location.**

***I understand that a complete official transcript will include my Grades as well as my PSAT/PLAN, ACT, and/or SAT score.***

Signature: \_\_\_\_\_