



Virginia Beach City Public Schools High School Transcript Request Form

*** All requests will be processed within 14 days**

\$3.00 PER TRANSCRIPT IS DUE AT TIME OF REQUEST *(for current students)*

\$5.00 PER TRANSCRIPT IS DUE AT TIME OF REQUEST *(for alumni students)*

WE ARE ONLY ACCEPTING CHECK OR MONEY ORDERS AS FORM OF PAYMENT

Name: _____ Date: _____

School Attended: _____ Graduation Year: _____ Counselor: _____

Date of Birth: _____ Student ID Number: _____

Name of College(s), Military, Trade or Scholarship(s)

*Address with a Zip Code is required for all schools outside of Virginia.
Student **must** return to Guidance to pick up all transcripts for scholarships*

**Does this college have a form
for Counselors to complete?**

**Common App
Used**

**Mail/
Pick-up**

Circle one: College/Military/Trade/Scholarship

YES

NO

1. _____

Circle one: College/Military/Trade/Scholarship

2. _____

Circle one: College/Military/Trade/Scholarship

3. _____

Circle one: College/Military/Trade/Scholarship

4. _____

Student Signature: _____

Parent Signature: _____

Required if you are under 18

1. If there are any forms the counselor must complete, the student **should** include them with this request.
2. **ACT/AP/SAT** scores will be included on transcripts per the Virginia Department of Education 8 VAC 20-160-30
3. All fields must be filled before being processed.

Office Use Only:

\$3.00 Paid _____ \$5.00 Paid _____ Recommendation Letter _____ Form _____

Date mailed or put in pick up bin _____ Fee Waiver _____