

Northeast Bradford Transcript Request Form

Transcripts are sent directly to the specified institution.

A. Please complete the following information:

Name _____

Birth date _____
First Middle Last (Maiden Name)

Year of Graduation _____

Telephone # (____) _____

Signature _____ Date _____

B. Institution Information:

Transcript to be sent to _____

Complete Mailing Address _____

C. Additional Information:

Please check the materials that are to be sent with your transcript:

- Application
- Application Fee
- Letter(s) of Recommendation # _____ ; total # of pages _____
- Required Essay(s) # _____ ; total # of pages _____
- Other _____

D. Fee - For former graduates of more than one year, please send a *check or money order in the amount of \$5 made payable to the Northeast Bradford School District. Payment can be sent to: Northeast Bradford High School; Guidance Office; 526 Panther Lane; Rome, PA 18837.*

TELEPHONE: 570-744-2521; FAX: 570-744-1445

Transcript requests can also be emailed to ddewing@nebpanthers.com . Please copy and paste the completed information in an email or complete the requested information and attach it as a Word file.

Guidance Office Use

Date request received _____

All components sent: Y N Missing items _____

Date sent _____

Return card received date _____

Payment Received: Y N
(if applicable)