

## Hamilton High School 211 AGGIE AVENUE

211 AGGIE AVENUE HAMILTON, ALABAMA 35570 205-921-3281 FAX: 205-921-2333



Number of copies you are	e requesti	Records Req	uest		
Transcr	ipt <i>(lists g</i>	grades, credits received	d, GPA and	date of gra	duation)
0 : 10 :: "	<u> </u>		-		
Social Security #			le	lephone #:	
Requested by:			Da	te of Birth:	
Name at Graduation:			Yea	ar of Gradu	ation:
	P	Please send to the fo	ollowing:		
Name:					
Mailing Address:					
City, State, Zip:					
<u>OR</u> - Fax #:					
Signature of Gradu	uate:			Date:	
Note: There is a \$5.00 charge for each record. Please include your payment with this form and allow 5 business days for processing.					
Pleas	se mail th	nis form with your che Hamilton High So Records Request/Re 211 Aggie Aven Hamilton, AL 35	chool egistrar nue	ey order t	o:
FOR OFFICE USE ONLY					
Date Received			Date Mai	1ea	
nitials A		ount Enclosed		Receipt #	