| Date: Lonoke High School - Transcript Request | | | |
|--|---|---|--|
| *Trans | scripts must be requested a mini | mum of 3 business days prior to their deadline. | |
| Student's Name: | | Advisor: | |
| Student ID # | | Grade Level/Graduation Year: | |
| envelope – used for Coll ~Electronic Transcript (I ~Unsealed Transcript (U Scholarship Applications | ege Admissions and Employment ET) – same information as Officia JS) – same as Official Transcript s – For pick up only | rades, College Board Scores, and Immunization Record, in a sealed Applications. l Transcript sent electronically to institution of choice. but not in sealed envelope – used for 1 st Semester transcripts and our personal perusal – For pick up only. | |
| | Transcript Type | Name and Address of Institution or Person (if mailing) or indicate "Self" if you will pick up. | |
| Transcript #1 | | | |
| Transcript #2 | | | |
| Transcript #3 | | | |