

Pinson Valley High School

6895 Highway 75 North
Pinson, Alabama 35126
Phone: (205) 379-5100 ♦ Fax (205) 379-5105

Guidance Department

TRANSCRIPT RELEASE FORM

I give permission to Pinson Valley High School to release an official transcript for the following:

STUDENT'S NAME _____

BIRTH DATE _____

DATE LAST ATTENDED (for former students only) _____
Month Year

Please send my transcript: _____

____ AS REQUESTED (Checking this blank allows us to send transcripts at your request without having to complete another transcript release form until after you graduate or until you reach 18 years of age.)

Current Students:

Your first transcript is free, after that they are \$5.00 each.

SIGNATURE OF STUDENT IF 18 YEARS OF AGE OR OLDER DATE

SIGNATURE OF PARENT/GUARDIAN IF STUDENT IS A MINOR DATE

Former Students:

Year of Graduation: _____ Last name when you attended PVHS: _____

Number where you can be contacted if there is a problem: _____

*Please note there is a \$5.00 charge for transcripts. This fee must be paid prior to the transcript being mailed or picked up.