RAMAPO HIGH SCHOOL
GUIDANCE DEPARTMENT

Michael Phillips
Principal

Annie Bino
Asst. Principal

Brenda Esquivel
Karin Bruno
Elizabeth Pannell
David Schweizer
Matt Sullivan
Candace Wood
COUNSELORS

REQUEST FOR TRANSCRIPT FORM

There will be a $5.00 fee for this service.
Please enclose Money Order

IMPORTANT: WE DO NOT KEEP COPIES OF DIPLOMAS. The transcript shows the grades you have achieved as proof of graduation. The transcript is embossed with the school's seal.

A transcript request must be in writing. Either by using this form or by mailing the below information to: Ramapo High School, 400 Viola Road, Spring Valley, New York 10977. This form can be mailed or faxed to 845-577-6467 Attention: Guidance Office.

PLEASE NOTE: By law and because of identity theft, we cannot send an "OFFICIAL COPY" (officially stamped transcript) directly to an individual. An official transcript can only be sent by mail, Not emailed, Not faxed to place of employment, college or military. Colleges require an "OFFICIAL" copy for admission. An official copy has a raised seal, dated Registrar's signature and a special signed envelope on the back flap.

However, an "**UNOFFICIAL**" copy (which will be stamped
"**UNOFFICIAL**" can be sent to you.

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PLEASE PRINT

_____ _____ _____ _____

LAST (Maiden) NAME | FIRST NAME | *YEAR GRADUATION _ Or YEARS OF ATTENDANCE | DATE OF BIRTH

_____

***MAIDEN NAME**

( ) SEND an OFFICIAL copy to:	( ) SEND or ( ) FAX an UNOFFICIAL copy to:
Name (admissions, etc.)	Name:
School, College, Agency, etc	Address
Street Address	Town, State, Zip
Town, State, Zip	FAX ot be sent to:

Relation to student: ( ) Self ( ) Parent ( ) Guardian Telephone: _____

Please sign and date transcript request:_____/_____