

## **Transcript Requests**

Please follow these guidelines for Transcript Requests:  
Allow 2 school days for processing

### **Local Residents:**

Visit the Registrar's office at the High School. Office hours when school is in session: 7:30 am to 4:00 pm. When school is not in session: 7:30 am to 3:30 pm. You will be required to sign a release form and pay a \$1 fee. Person requesting the transcript must sign for themselves.

### **Non-Local Residents:**

Send a written request to our office. (form is available to print off). The following information is required:

1. Your full name (used during attendance)
2. Your birth date
3. Forwarding address. We will forward **official** transcripts to colleges/universities or potential employers. We can forward **unofficial** transcripts to you. No transcripts will be faxed.
4. Your signature.

There is a **\$1 fee** charged for each transcript. Checks may be made out to Moline High School.

Please send requests to:

Moline High School  
Registrar  
3600 Ave of the Cities  
Moline, IL 61265

Any questions? Contact Mrs. Hastings at:309-743-8845 or [chasting@molineschools.org](mailto:chasting@molineschools.org).

**Please print out the following form**

**TRANSCRIPT REQUEST FORM**

(Please allow two school days for processing.)

In order to receive a transcript, please print and sign the form below. The form must be mailed or faxed in order to release your transcript.

Moline High School  
Registrar  
3600 Ave of the Cities  
Moline, IL 61265

Fax: 309-757-3667

**Printed** name at time of graduation or attendance:

\_\_\_\_\_

**Date of birth** \_\_\_\_\_

**Year of graduation or last year of attendance** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Signature**

\_\_\_\_\_

**Mail (we do not fax) transcripts to:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All transcripts will cost \$1.00 per copy. Make checks payable to: Moline High School