

NASHUA HIGH SCHOOL SOUTH

36 Riverside St.
Nashua, NH 03062

Phone: (603)-966-1100

Fax: (603)-966-1328

REQUEST FOR TRANSCRIPT

Student Name:
(at time of graduation)

(Please Print)

Year of Graduation:

Date of Birth:

Day School Graduation:

Night School Graduation:

Email Address:

Best Phone Number Contact:

Where to send the transcript:

Deadline (if applicable):

Please allow 4-6 weeks for processing and send the information to the Registrar, Nashua High School South, 36 Riverside St., Nashua, NH 03062.

Student Signature:

Parent Signature:
(If student is under 18)

FOR OFFICE USE ONLY:

Date Received:

Date Fulfilled/Mailed/Faxed:

Payment Received: