

BUNKER HILL HIGH SCHOOL

314 South Meissner

Bunker Hill, IL 62014

Phone: 618-585-3232

Fax: 618-585-3241

HIGH SCHOOL RECORDS REQUEST FORM

Date: _____

Phone Number: _____

Printed Name: _____

Last

First

Middle Initial

Maiden Name: _____

Records desired:

_____ Official transcript including ACT scores

_____ Medical records

Please send records to:

Please Choose:

_____ Graduate—Class of _____

_____ Current Student

_____ Date of last attendance _____

Signature: _____

Signature authorizes release of your records