## BEACON HIGH SCHOOL Transcript Request Form

l,			(p	(please print), am requesting that a	
•	y of my high school to ployment:	ranscript be sent	to th	e following colleges or places of	
1.			2.		
3.			4.		
*All	requests must be receive	ed in writing. Fax:	845- 2	31-0471	
Mail	: BHS Guidance Dept.	101 Matteawan	Road	Beacon NY 12508	
Signature:			Date:		
Year of Graduation:		Phone:			
		Do not wri	te below	this line	
Guidance Signature:				date sent:	