

# Lake George Jr.-Sr. High School

## TRANSCRIPT REQUEST FORM

***A transcript request must be made by the student. Please fill out this form in its entirety.***

Full Name (please print): \_\_\_\_\_

Maiden/former name (if applicable): \_\_\_\_\_

Date of birth: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

Daytime phone: \_\_\_\_\_

Are you a graduate of Lake George? If YES, which year \_\_\_\_\_. If NO, year of exit \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*Photo ID is required for copies of transcripts that are picked up, mailed or emailed.  
Photo ID is not required if a transcript is going directly from LGHS to a college/university.*

***Please print the mailing address/email address/fax number where transcript will be sent:***

\_\_\_\_\_  
(College/Dept, Employer, Self)

\_\_\_\_\_  
(Mailing Address /Email address/Fax number with area code)

\_\_\_\_\_  
(City, State, Zip)

**Mail/fax/email this form to:**

Lake George Jr.-Sr. High School c/o The Counseling Center

381 Canada Street Lake George, NY 12845

Fax: (518) 668-3796

Email: [crislerk@lkgeorge.org](mailto:crislerk@lkgeorge.org)

*Please note: We do not have copies of high school diplomas.  
Turn-around time to process your transcript request is approximately 1 day.*