

CURRENT STUDENT TRANSCRIPT REQUEST FORM



**Lubbock High School**

2004 19th St., Lubbock, Texas 79401

Ph: 806-219-1600



Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ LISD Student ID#: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Purpose of request (check one): College \_\_\_\_\_ Scholarship \_\_\_\_\_ Camp \_\_\_\_\_ Dual Credit \_\_\_\_\_  
Other (please explain): \_\_\_\_\_

Number of copies needed: \_\_\_\_\_ **Transcripts are \$1.00 each; pay in cash to the registrar**

Transcript Delivery Options (allow for 5 business days for request to be processed):

- Pick up directly from the registrar in the administration office. Must have LHS ID badge or state ID.
- TREX electronic upload (only available to **public** Texas colleges/universities). Please provide the full name of the school(s) you need to send transcripts to via TREX:  
\_\_\_\_\_  
\_\_\_\_\_

- Mail directly to college/university by way of the registrar office; please plan for additional time it takes for the USPS to process mail. List the school mailing address below:

School Name:

Street Address or P.O. Box:

City, State, Zip:

School Name:

Street Address or P.O. Box:

City, State, Zip:

School Name:

Street Address or P.O. Box:

City, State, Zip:

**For Office Use Only:**

Date request received \_\_\_\_\_ Date request processed \_\_\_\_\_