



# *Bandys High School*

5040 East Bandys Road

Catawba, NC 28609

(828) 241-3171

Fax (828) 241-9402

## **Transcript Request**

Please print all information except signature

**Full Name** \_\_\_\_\_

**Last 4 digits of Social Security #** \_\_\_\_\_

**Year of Graduation** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Current Mailing Address** \_\_\_\_\_

\_\_\_\_\_

**Phone # where you can be reached** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### **Mail to:**

<b>Name</b>	
<b>Mailing Address</b>	
<b>City, State, Zip Code</b>	
<b>Name</b>	
<b>Mailing Address</b>	
<b>City, State, Zip Code</b>	
<b>Name</b>	
<b>Mailing Address</b>	
<b>City, State, Zip Code</b>	
<b>Name</b>	
<b>Mailing Address</b>	
<b>City, State, Zip Code</b>	