

Burnt Hills-Ballston Lake High School

88 Lakehill Road, Burnt Hills, NY 12027

School Counselors

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518-399-0502

FINIAL TRANSCRIPT RECLIEST

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**If you	have graduated f	from BH-BL and are request	ting a transcript, please	complete the following form and return to:
	(By mail)	BH-BL High School Guidar 88 Lakehill Road Burnt Hills, NY 12027	nce Office	
	(By Fax)	(518) 399-0502		
	(By email)	transcripts@bhbl.org		
	Name (to include	de first, middle initial and la	nst):	
	Any previous name that could be on your records (maiden name):			
	Graduation Date (or last date attende	:/(year)	Date of Birth:	//(year)
	Current Address	:		
	(number & street, city, state, zip)			
	Daytime phone (for clarification/confirmation	on purposes):	(please include area code)
		ls you would like us to ficial Transcript to:	OR	Please provide us with a name AND address where we can mail your Official Transcript to:
			_	
			_	
ou are i	requesting Officia	ıl Transcripts to be sent to y	our address of residence	e usually sent directly to a school or employer. If e, please be advised that if you open the envelope ended for your own records ONLY.
	ALL REQUESTS A			S TO RELEASE YOUR RECORDS** DIRECTLY WITH ADMISSIONS IN 7-10 DAYS
	•	require a transcript be so		urposes, you MUST indicate so!
	(s	ignature)		(date)