

# Ballard High School

## Transcript Request Form

### Student Information (please print):

Name \_\_\_\_\_ Year of Graduation \_\_\_\_\_  
(First Middle Last <Maiden>)

Current Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

### Prospective Employer/College/Scholarship Information:

Name of Prospective Employer/College/Scholarship \_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Check all that apply:

- Ballard High School will mail the transcript to: (please circle one)      STUDENT      EMPLOYER/COLLEGE
- Student/former student will pick up transcript
- A recommendation is required from the guidance counselor (See Ms. Doland)

### Comments or Instructions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Return this form to:  
Terri Doud, Guidance  
Ballard High School  
PO Box 307  
Huxley, IA 50124  
Email: [tdoud@ballard.k12.ia.us](mailto:tdoud@ballard.k12.ia.us)  
Phone: 515-597-2971 ext. 2177  
Fax: 515-597-2964