

New Vistas High School

5391 Central Avenue ♦ Portage, IN 46368 ♦ Off ice Phone (219) 850-4448 ♦ FAX (219) 850-4445

Anna Swope, Principal

NVHS Transcript Request Form

Date of Request:		Student ID Number:		
Student's Name:		Name at time of Graduation/Maiden:		
Date of Birth:		Social Security Number:		
Preferred Method of Delivery (choose one)				
<input type="checkbox"/>	Mail Transcript to:			
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>	Fax Transcript to:		Attention:	
<input type="checkbox"/>	Email Scanned Copy to:			
<input type="checkbox"/>				
Parent Signature is required for students under the age of 18				
Student Signature:		Date:		
Parent Signature:		Date:		
<p>Note: There is a \$ 2.00 charge per transcript for former students. We accept cash or money orders only. Money orders should be made payable to NNVHS. Payments and requests should be mailed to:</p> <p style="text-align: center;">Neighbors' New Vistas High School 5391 Central Avenue Portage, IN 46368 Atten: Registrar</p>				

FOR NNVHS OFFICE USE ONLY					
Date Received:			Amount, Payment Received:		
Mailed/Faxed:			Payment Type	<input type="checkbox"/> Cash	<input type="checkbox"/> Money Order
Date Issued to Student			Outstanding Fees:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			If yes, Outstanding Amount:		\$