

BALDWINSVILLE CENTRAL SCHOOL DISTRICT

Baldwinsville, New York 13027

C.W. Baker High School
Office of the Registrar, Joan Turner
29 East Oneida Street
(315) 638-6006
FAX (315) 638-6150
Website: www.bville.org

TRANSCRIPT REQUEST FORM

HOW TO REQUEST A TRANSCRIPT:

- † **Mail requests to *C.W. Baker High School c/o Joan Turner, Registrar***
- † **Include a stamped envelope with the address for each institution you are requesting documents be sent to.**
- † **The student's signature is required!**
 - Requests are usually processed within 1-2 business days upon arrival.
 - Transcripts will normally take anywhere from 7 to 14 days to arrive at destination. (Please plan accordingly)

PLEASE PRINT CLEARLY!

Today's Date: _____

Last Name _____ First Name _____ Middle Name _____

Signature _____ D.O.B _____

Former Name: (If applicable) _____

Year Graduated: _____ (**OR**) Year you Left: _____

Daytime Phone Number: _____ Email address: _____

Please **mail** all requests to:

C.W. Baker High School, 29 East Oneida Street, Baldwinsville, New York 13027
Attn: Joan Turner, Registrar

Please note **transcript requests need a signature** before we can release the information.

**** A transcript mailed to your home or picked up will be stamped "Unofficial" ****

<i>For Internal Use Only:</i>	
Date received _____	Date mailed: _____