



West Franklin Schools

Home of the Falcons

“Partnering to help all students learn in a safe and respectful environment”

Transcript Request Form

Full name _____ Maiden Name _____

Date of Birth _____ Social Security # _____

Did you graduate? _____ If yes, what year? _____ If no, date of withdrawal _____

School or College that your transcript should be sent:

College/University: _____

Address: _____

City/State/Zip: _____

I hereby authorize officials of West Franklin High School to release my transcript to the organization listed above.

Signature

Transcript Policy

A maximum of two (2) WFHS official transcripts will be available to students upon graduation. Additional transcripts or transcripts requested after your graduation year will be provided at a cost of \$2.00. Payment is expected prior to the school issuing additional copies of your transcript.

West Franklin High School
511 East Franklin
785-566-3392

West Franklin Middle School
331 East D Street
785-566-3512

Pomona, Kansas 66076