Panola Schools District

REQUEST FOR OFFICIAL TRANSCRIPT

Panola Charter High School Panola Early College High School Texas Early College High School

Please Print All Information: Name Student Used in School Social Security #____/____ Date of Birth ____/____ Month Day Year Year of Graduation _____ or Last Year of Attendance _____ Transcript Requested By: City _____ Ph # _____ Number of Copies Requested Please Initial in Appropriate Box: O I will take transcript with me O Please mail College / University Name & Mailing Address Signature of Requestor _____ Date of Request _____ Upon completion, please bring the form or mail/Email/fax to: Panola Charter School 1110 FM 10 / P.O. Box 610

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