



Final High School Transcript Request Form

*Submit this form to your **Guidance Counselor** so that they can send us your final transcript.*

Do not send this form to the College of Saint Elizabeth!

Student Name : _____

I request that my final official high school transcript be sent to:

College of Saint Elizabeth
Office of Admission
Santa Rita Hall
2 Convent Road
Morristown, New Jersey 07960-6989

This document will verify that I have graduated from high school and will provide grades for my senior courses.

Student Signature: _____

Date: _____