## HARRY S TRUMAN HIGH SCHOOL



Keri Alfano, Principal

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|--|-----------------------|--|
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| DATE:  |                       |  |
| To Whom It May Concern:  |                       |  |
| The following is <b>REQUIRED</b> to • Self-addressed, stamped            | , , ,                 | ecords:<br>parties receiving copies of records |
| OFFICIAL TRANSCRIPTS A   | RE ONLY MAILED        | TO COLLEGES & EMPLOYERS                        |
| The following information is no  | eeded:                |  |
| Name used while attending Ti   | ruman:                |  |
| Name now:  |                       |  |
|  |                       |  |
|  |                       |  |
| Telephone number   |                       |  |
| Please check off what records  | s you are requesting: |  |
| □Transcript  | □Immunization         | (if available)                                 |
| ☐Graduate Letter   | □Discharge Le         | tter   |
| ☐SAT Scores  |                       |  |

## ABSOLUTELY NO RECORDS WILL BE GIVEN OUT IMMEDIATELY.

Please allow at least one – two weeks for processing. Thank you.