

Request for High School Transcript



Lejeune High School



835 Stone Street
Camp Lejeune, NC 28547
Guidance Office Phone: 910-451-2453
Guidance Office Fax: 910-451-2454

Transcript requests **must be signed. Once signed, they may be scanned/emailed to Student Services at cassie.marrero@dodea.edu or faxed to number above. **Requests without signatures will not be processed.***

Name _____
 First Middle Last

Date of Birth: _____ Graduation/Withdrawal Year: _____
 Month Day Year

Name at the time of graduation (if different): _____

Please prepare the following documents:

Official High School Transcript (with signature and embossed school seal)
and SAT/ACT/AP Scores (if available)

Official High School Transcript (with signature and embossed school seal)
without SAT/ACT/AP Scores

Unofficial High School Transcript (no signature or school seal)

Will pick up

Send to the following address/es (a faxed transcript is not considered "official"):

- Name of college followed by address/es
- Address/es of requestor

I give DoDEA permission to release my child's transcripts pursuant to the Privacy Act of 1974 (5 U.S.C. § 552a).

(if student is under 18)

Parent Signature: _____ Date: _____

I authorize DoDEA to release my transcripts for verification purposes pursuant to the Privacy Act of 1974 (5 U.S.C. § 552a).

(if student is 18 or over)

Student Signature: _____ Date: _____

Daytime Phone Number: (____) _____ - _____ E-Mail: _____