

POMPANO BEACH HIGH SCHOOL

School Counseling Department

600 NE 13th Avenue

Pompano Beach, Florida 33060

(754) 322-2000 Main Office

(754) 322-2020 School Counseling

(754) 322-2130 Main Office Fax

(754) 322-2133 School Counseling Fax

REQUEST FOR RECORDS

Date _____

Name of last school attended _____

Address of school _____

Name of home high school _____

(Your assigned boundary high school if you were not attending Pompano Beach High)

PLEASE SEND AN **OFFICIAL TRANSCRIPT** FOR:

Student's Name

Grade

Date of Birth

Date Last Attended

PLEASE INCLUDE:

All credits earned

Test scores

Health records (Immunization & Physical)

Explanation of grading system

Grades up to date of withdrawal

Exceptional education records

Signature of Parent/Guardian

Thank you for your prompt attention to this request.

Allison Garsh, Registrar