

HIGH SCHOOL TRANSCRIPT REQUEST

Student: Please sign at the bottom and give this to your high school registrar's office.

This is the student's request for a **CURRENT HIGH SCHOOL TRANSCRIPT** to be sent directly to Oak Hills Christian College for determination of admission.

ONCE THE STUDENT HAS GRADUATED, PLEASE SEND AN OFFICIAL FINAL TRANSCRIPT.

High School Name: _____

Student Name: _____

Date of Birth: _____

Student ID #: _____

Graduation Date: _____

Student Signature: _____ Date: _____

PLEASE MAIL OR EMAIL THE TRANSCRIPT DIRECTLY TO:



**Admissions Office
Oak Hills Christian College
1600 Oak Hills RD SW
Bemidji, MN 56601
admissions@oakhills.edu**