



HUENEME HIGH SCHOOL

500 W. Bard Road • Oxnard, California 93033 • (805) 385-2667 • (805) 385-2817 fax

Request for School Transcript \$5.00 Per Transcript - Personal Checks NOT Accepted

Date ____/____/____

Student Name _____

Student # _____ Date of Birth ____/____/____

Phone # (____) _____ - _____

Select one:

Graduate – Graduation year _____

Non Graduate – Date last attended: ____/____/____

Select one:

Official Copy

Unofficial Copy

Please indicate if you will pick up the transcript or if the school needs to mail it:

Will Pick Up

Mail Out* *If transcript is to be mailed, indicate the proper address and zip code below:*

Signature of person making request _____



OFFICE USE ONLY | Amount paid \$ _____ Date Completed _____ Date mailed _____

If you have any questions please call Records: (805) 385-8401
or email linda.bustamante@ouhsd.k12.ca.us