

Transcript Request

The legal record or proof of your high school education is called an official transcript. You will need this when entering college, job opportunities, identification replacement, etc. To request a transcript, please follow the procedure below:

Please Note: **The release of a student transcript requires a signed request from the student (or the parent/legal guardian if the student is less than 18 years old). A telephone call will not release your records.**

Allow 48 hours for a transcript request to be processed.

Official transcripts will be stamped with the high school seal and must be kept in the sealed envelope for the transcript to remain official.

1. If you are a **currently** enrolled student at Wylie High School or transferring to a different high school, fax the signed form to 325-690-0320 or bring the form to the counseling office.
2. Special Education records including IEP's evaluations and assessments are located at the Wylie High School School Services Office located at 6249 Buffalo Gap Rd. Abilene Texas 79606, 325-437-2370 or fax 325-437-2373.
3. If you are a **former student/graduate** that attended Wylie High School you may do any of the following.
 - A. **Mail** the completed transcript request form to:
Wylie Independent School District
6249 Buffalo Gap Rd
Abilene, Texas 79606
Attn: Records
 - B. **Fax** the completed transcript request form to:
325-695-3438
 - C. **Deliver** the form to the Wylie Ad. Bldg. located at
Wylie Independent School District
6251 Buffalo Gap Rd
Abilene, Texas 79606
4. After graduation, former students will need to send their ACT/SAT scores directly from the testing agency to the academic institution. www.ACT.org or www.Collegeboard.com

Official Transcript Request Form

Wylie High School
4502 Antilley Rd
Abilene, Texas 79606

Transcripts will be mailed first class mail within 48 hours of receiving this request.
Signature is required for processing.

Name _____
Last First M.I.

Maiden or Former Name: _____

Date of Birth: _____

Year of Graduation: _____ or Dates of Attendance _____

Current Address: _____

Phone #: (Required for contact if there is a problem processing the request.) _____

_____ I authorize Wylie High School to release my SAT scores to the addresses listed below
from the following date _____

Send Transcript to: (Please Print)

1. Institution/Organization: _____

Attention: _____

Street Address: _____

City, State Zip Code: _____

2. Institution/Organization: _____

Attention: _____

Street Address: _____

City, State Zip Code: _____

3. Institution/Organization: _____

Attention: _____

Street Address: _____

City, State Zip Code: _____

I authorize Wylie High School to release my transcript to address (es) listed above:

Signature: _____ Date: _____

For Office Use Only: Date Transcript Mailed: _____

Transcript will be picked up _____