

Bethesda - Chevy Chase High School
TRANSCRIPT REQUEST
Registrar

Name: _____ ID #: _____ Grade: _____ Date: _____

e-Mail Address: _____ Counselor: _____

Clipboard Sign-In #: _____ College Application Deadline: _____

Please Send:

- Transcript*
- Counselor Recommendation*

Attach Secondary School Report:

- Bethesda – Chevy Chase High School Form*

Colleges require that your ACT, SAT, and TOEFL scores be sent directly from the appropriate testing service to the schools to which you are applying.

Print Complete Name and Mailing Address of Recipient

OFFICE USE ONLY

- Check Cash

Nevance: _____

B-CC Mailed: _____