

BEULAH HIGH SCHOOL

Mr. Bryant Lumpkin, Principal

Dr. Donna Bell, Assistant Principal

Mr. Adam Keel, Assistant Principal

TRANSCRIPT REQUEST FORM (Former Students)

Full Name _____
(include last name when enrolled)

Address _____

Phone _____ Date of Birth _____

Soc. Sec. Num. _____ Graduation Year _____

I give Beulah High School permission to send a copy of my official transcript to the name(s) and address(es) identified below. I have enclosed \$5.00 for each copy requested.

TRANSCRIPT SHOULD BE SENT TO:
(include Name and Address of University/College/Business/etc.)

Form and payment must be received before transcript is sent. Cash is accepted if form is being delivered to Beulah High School. **DO NOT MAIL CASH.** Checks or money orders are accepted for forms submitted by mail. Mail form and \$5.00 fee for each copy requested to:

Beulah High School
c/o Registrar
4848 Lee Road 270
Valley, AL 36854

If you pay on PayPams.com, you may email this form to Mrs. Van Horn @ vanhorn.jennifer@lee.k12.al.us. Once payment is confirmed your transcript will be mailed. Transcripts will be sent via US Postal Service. We are unable to fax or electronically submit transcripts.

FOR OFFICE USE ONLY.

Date Received: _____

Receipt No.: _____

4848 Lee Road 270
Valley, AL 36854



Phone: 334.705.6020
Fax: 334.749.1914