



Northern Highlands Regional High School

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JOSEPH J. OCCHINO
Principal

MICHAEL T. KOTH
Assistant Principal of
Athletics

TONY LAROCCA
Assistant Principal of
Student Affairs

KELLY A.
PETERFRIEND
Director of Guidance

GENERAL TRANSCRIPT REQUEST

Date of Request: _____ Year of Withdrawal/Disenrollment: _____

Name:

Counselor Name: _____

Name/Address of Institution for transcript to be sent to:

Reason for transcript:

Please note: Only unofficial copies can be sent to the student or parent/guardian.

Signature of Parent/Guardian: (If student is under 18)

For Office Use Only

Date transcript sent: _____

Transcript sent by: _____