

El Dorado High School
561 Canal Street
Placerville, CA 95667

530-622-3634 x1029

Request for Transcript

Name: _____ Date: _____

Year of Graduation: _____ Date of Birth: _____
(mm/dd/yyyy)

Maiden Name: _____

Phone: _____

Send To: _____

Pick up

Graduate's Signature: _____

Please note: There is a \$2.00 charge for each transcript requested. If you are sending a money order, make it out to El Dorado High School (personal checks are not accepted). If you have any questions please call Regina Medina at 530-622-3634 x 1029. Send your requests to:

El Dorado High School
Attn: Registrar
561 Canal Street
Placerville, CA 95667