

# CHATTOOGA HIGH SCHOOL

989 Highway 114  
Summerville, GA 30747  
Tel.(706)857-2402 \* Fax (706)857-2565

**Mr. Matthew West**

Assistant Principal/Curriculum & Testing

**Mr. Mark Turner**

Assistant Principal/Athletic Director/Discipline

**Mr. Roger Wilkinson**

Principal

**Mrs. Nancy Edwards**

Assistant Principal/CTAE Director

**Mrs. Courtney Driskell**

Counselor

## TRANSCRIPT REQUEST FORM

Full Name \_\_\_\_\_  
Last First Middle (Maiden Name)

Address \_\_\_\_\_  
Street Address City, State, Zip

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Year of Graduation \_\_\_\_\_ OR Date Last Attended \_\_\_\_\_

To comply with the provisions of the Family Education Rights and Privacy Act of 1974, permission is here given to school officials to release the secondary school record and other requested information to the following college/university:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Student (REQUIRED)

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Signature of School Official

\_\_\_\_\_  
Date Sent

**Email transcript request to: [crspain@chattooga.k12.ga.us](mailto:crspain@chattooga.k12.ga.us)**

The Chattooga County School District does not discriminate on the basis of race, color, religion, sex, national origin, age, or disability in its programs, activities, or employment practices.