



# Harford County Public Schools

## OFFICIAL TRANSCRIPT REQUEST PROCESS

- ✓ Complete and sign Official High School Transcript Request Form
- ✓ Enclose **fee of \$2.00** for each transcript requested – (CASH or MONEY ORDER only) made payable to Harford County Public Schools
- ✓ Please mail completed request and fee to the school you graduated or withdrew from (See list below)
- ✓ Please allow 7-10 business days from date received for processing

SCHOOL ADDRESS	MAIN OFFICE	SCHOOL COUNSELING OFFICE PHONE & FAX NUMBERS
Aberdeen High 251 Paradise Road Aberdeen, MD 21001-2399	410-273-5500	<b>410-273-5585</b> Fax – <b>410-273-5587</b>
Alternative Education Center for Educational Opportunity 253 Paradise Road Aberdeen, MD 21001-2492	410-273-5594	<b>410-273-5594</b> Fax- <b>410-273-5592</b>
Bel Air High 100 Heighe Street Bel Air, MD 21014-4196	410-638-4600	<b>410-638-4606</b> Fax – <b>410-638-7953</b>
C. Milton Wright High 1301 N. Fountain Green Rd Bel Air, MD 21015-2599	410-638-4110	<b>410-638-4270</b> Fax – <b>410-638-4114</b>
Edgewood High 2415 Willoughby Beach Road Edgewood, MD 21040-3496	410-612-1500	<b>410-612-2071</b> Fax – <b>410-612-1585</b>
Fallston High 2301 Carrs Mill Road Fallston, MD 21047-1899	410-638-4120	<b>410-638-3542</b> Fax – <b>410-638-4125</b>
Harford Technical High 200 Thomas Run Road Bel Air, MD 21015-1699	410-638-3804	<b>410-638-3884</b> Fax – <b>410-638-3820</b>
Havre de Grace High 700 Congress Avenue Havre de Grace MD 21078	410-939-6600	<b>410-939-6603</b> Fax – <b>410-939-6603</b>
Joppatowne High 555 Joppa Farm Road Joppa, MD 21085-4698	410-612-1510	<b>410-612-1510</b> Fax - <b>410-612-1528</b>
North Harford High 211 Pylesville Road Pylesville, MD 21132-1398	410-638-3650	<b>410-638-3650</b> Fax – <b>410-638-3632</b>
All other schools not listed above please call: The Office of School Counseling	410-588-5245	<b>410-588-4313</b>

**AUTHORIZATION TO RELEASE  
OFFICIAL HIGH SCHOOL TRANSCRIPT**

\_\_\_\_\_  
First                                      Middle                                      Maiden                                      Last

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
School                                       graduated                                       withdrew

**Year Graduated** \_\_\_\_\_ **-or-** **Year Withdrawn** \_\_\_\_\_

\*\*\*\*\*

**Please send the transcripts to:**

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

Transcript requested for  college  scholarship  employment  military  personal use

**Note: if transcript envelope is opened by student prior to delivery to college, university or employer, the transcript is considered invalid. Please order two if you need a copy for yourself.**

**Authorization Notification**

As the individual about whom this information is being requested, I hereby authorize the Office of School Counseling of the Harford County Public Schools system to release information concerning my records. I understand that the recipient of the records(s) will use said document(s) for legitimate interests only and that the information contained therein shall not be further transferred or communicated to any other party or agency without my expressed written consent except under authority of Public Law 93-380, Educational Rights and Privacy Act.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

- ✓ **Please allow 7-10 business days for processing**
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**(Cash or money order only – no personal checks)**