

Elkhart Lake - Glenbeulah School District

DISTRICT OFFICE / HIGH SCHOOL

Dr. Ann Buechel Haack, District Administrator / Mr. Ryan Faris, Principal abhaack@elgs.k12.wi.us / rfaris@elgs.k12.wi.us
201 North Lincoln Street, P.O. Box 326, Elkhart Lake, WI 53020 · Tel (920) 876-3381 · Fax (920) 876-3511

ELEMENTARY / MIDDLE SCHOOL

Mrs. Debbie Hammann, Principal dhammann, @elgs.k12.wi.us
251 East Maple Street, P.O. Box 518, Elkhart Lake, WI 53020 · Tel (920) 876-3307 · Fax (920) 876-3105

www.elgs.k12.wi.us

TRANSCRIPT REQUEST

Today's Date:	<u></u>	
Student Name:	Name while attending ELGHS:	
Student Address:		
Date of Birth:		
Graduating Class of:	Telephone # where you can be reached:	
Send copies of my transc	cript to:	
	niversity/Technical College, Employer, etc.):	
City, State, Zip Code:		
I hereby consent to have my trans	script(s) released to the addresses above:	
Signature:		
(Please return Transcript Request form	to the High School office via in person, fax, or email (<i>rruechel@elgs.k12.wi.us</i>).	Thank you.)
FOR OFFICE USE ONLY		
Transcript was mailed on:		
Transcript was issued to student on	:	
Elkhart Lake-Glenbeulah High School	ol employee issuing transcript:	