Transcript Request Form

This request form is only for students who attended Boswell High School prior to 2010. There is a $3 Fee for all transcripts and must be paid in advance. Unpaid requests will not be filled.

Please provide the following information and mail request form with payment to:

Boswell High School
5805 W Bailey Boswell Road
Fort Worth, TX 76179
Attn: Jennifer Connely

Name________________________________________
Name while attending Boswell_____________________
DOB______________
Last 4 digits of SS#________________ Contact #_____________________
Graduation year/last year of attendance __________
Number of copies_________ Amount enclosed____________________

Official copies must be mailed directly to College/Requesting Institution.

College/Institution_____________________________________________________
Address________________________________________________________________

College/Institution_____________________________________________________
Address________________________________________________________________

Personal copies may be mailed, emailed or faxed directly to student.

Address_______________________________________________________________
Email________________________ fax #______________________________________

Signature (required)________________________ Date________________________