Mrs. Aviva Harpaz
Menaheles

BINA
HIGH SCHOOL

Linda Peck
Principal

REQUEST FOR TRANSCRIPT

In order to forward or request a transcript or other school records to or from any school of prospective students, we are required to have written permission.

I hereby give my permission for:

_____
Name of Former School

_____
Street Address

_____
City, State, Zip

To release all records pertaining to:

_____
Student's Name (PRINT) Class Year

And to forward those records to:

BINA High School
420 Spotswood Avenue
Norfolk, VA 23517

Please forward all official transcripts.

_____
Parent or Guardian Date