

THOMAS JEFFERSON HIGH SCHOOL

830 OLD CLAIRTON ROAD JEFFERSON HILLS, PA 15025 PHONE: 412-655-8610

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WEST ELIZABETH - JEFFERSON HILLS - PLEASANT HILLS

PETE MURPHY

ADAM KNARESBOROUGH

ERIKKA KUHSE

Principal Assistant Principal Assistant Principal

HIGH SCHOOL TRANSCRIPT RELEASE FORM

Legal enrollment name:		
Last (Maiden)	First	Middle
Graduation Year:	Date of Birth:	
information therein to A	or release and/or faxing of m NY educational institution, so r prospective employer upor	cholarship committee, athletic inquiry
Student Signature (if 18)	 Parent/Guardiar	n Signature (student under 18)
Telephone Number	Date	
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If you are a former student, please of Counseling Office at Thomas Jeffers	•	nd return the completed form to the
Mail to (School/Agency)	<u>Comple</u>	ete Address

It is the policy of the West Jefferson Hills School District to not discriminate on the basis of sex, handicap, age, race, color, and national origin in its educational and vocational programs, activities, or employment as required by Title IX, Section 5904 and Title VI. For information regarding services, activities, programs, and facilities that are accessible to and usable by handicapped persons or about your rights or grievance procedures, contact the Director of Human Resources at 412-655-8450.