

Peekskill City School District

Our mission is to educate and empower all students to strive for excellence as life-long learners who embrace diversity and are contributing members of a global society.

Dr. Jenna Ferris, Principal

Dr. Naima J. Smith, Assistant Principal

1072 Elm Street, Peekskill, NY 10566-3499
Phone: (914) 737-0201 ext.3524 Fax: (914) 737-2550
Email: nsmith@peekskillschools.org

GRADUATES/FORMER STUDENTS OF PEEKSKILL HIGH SCHOOL REQUEST FOR TRANSCRIPT

- Please complete <u>all</u> information and sign the bottom of the form in order for your request to be processed in a timely manner.
- Include a copy of your state issued picture identification (ID). Requests <u>will not</u> be processed without it.
- Please send the completed transcript request form with a copy of your state issued picture ID to:

(914) 743-5504

Fax:

Mail:
Peekskill High School
Counseling Office
1072 Elm Street
Peekskill, NY 10566

Email (Form & ID as an attachment):

gkhan@peekskillschools.org

<u>NOTE:</u> If you are applying to a school and need an **OFFICIAL** transcript, we can mail it directly to the school. **Please indicate at the bottom of this form the address of where you would like it sent.** If we mail the transcript to you, it **MUST** remain sealed in the Peekskill High School envelope to be official. We can give you a copy of your transcript for your personal use that will have "unofficial" stamped on it.

PLEASE NOTE: TURNAROUND TIME FOR PROCESSING REQUESTS: 5 BUSINESS DAYS.



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PEEKSKILL HIGH SCHOOL ALUMNI TRANSCRIPT REQUEST

1072 Elm Street Peekskill, NY 10566

(914)737-0201 Ext. 3519	Email request to: gk	khan@peekskillschools.org	Fax reque	est to: (914)743-5504
Name	, Maiden Name			
Date of Birth	Phone Number			
Current Address	Street	City	State	Zip Code
PHS Graduate? □ Yes What		□ No Last Year Attendissued picture ID with all re		
	Please ch	eck all that apply		
☐ I am requesting the Official	Transcript be released	to the following:		
	College, Trade Sc	chool, Agency or Employer		
	Mai	ling Address		
☐ I am requesting an Unofficia	ll Transcript be release	ed to the following:		
		Name		
	Mailing Address, Fo	ax Number or Email Address		
I understand that Peekskill City Semail. I also understand Official	Transcripts are mailed of			