



# Sacred Heart Academy

## Transcript Request Form

For Scholarships  
Fee of \$2.00

Student Name: \_\_\_\_\_

Scholarship Name: \_\_\_\_\_

Scholarship Address: \_\_\_\_\_

Scholarship Deadline: \_\_\_\_\_

Please Check One:

\_\_\_\_\_ Application paperwork is attached

\_\_\_\_\_ I will be sending the application paperwork separately

Teacher Recommendations to be included are: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional notes to your Guidance Counselor: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

**\*Please allow a minimum of 10 school days for processing\***

**\*\*Remember to send your SAT and/or ACT scores directly from the testing agencies. SHA does not send out scores due to Score Choice\*\***

For Office Use Only:

Date Received: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Date Sent: \_\_\_\_\_

Method Sent: \_\_\_\_\_