

**Caddo Parish Magnet High School**  
**Record Request Form – Transcripts & ACT Score Reports**

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Name (last, first, middle)	Date of Birth	Student ID Number	Telephone Number
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Home Street Address	City	State	Zip	Email Address
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*I waive \_\_\_\_\_ I do not waive \_\_\_\_\_ my right to see the teacher’s or counselor’s recommendation.  
**(Important Note: Most Colleges and teachers expect you to waive this right.)***

All fees for transcripts and ACT score reports are processed through [www.PayForIt.net](http://www.PayForIt.net). This form and payment must be submitted before any transcript/ACT score report will be processed. Please allow **ONE WEEK** (5 working days) for the processing of your request. Note it is the student’s responsibility to verify that he/she meets qualifying requirements for the university/college prior to making a request. Students are also responsible for verifying that the university/college will accept a copy of the ACT score report from the school.

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<b>Student Signature</b>	<b>Date</b>	<b>Parent Signature</b>	<b>Date</b>
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**The following are required prior to processing requests:**

- Transcript Fee (via [www.PayForIt.net](http://www.PayForIt.net)) – \$3.00 per transcript + 3.5% processing fee
- ACT Score Report Fee (via [www.PayForIt.net](http://www.PayForIt.net)) – \$3.00 per score report + 3.5% processing fee
- Request Form with **completed** information below

					<i>Office Use Only</i>		
College/University/Individual (include a complete address)	Application Deadline	Transcript Copy - √	ACT Copy - √	College Form Attached - √	Date Request Form Submitted	Date Fee Submitted via PayForIt	Date Mailed (staff initials)
1.							
2.							
3.							
4.							
5.							