

BROOKLINE HIGH SCHOOL  
OFFICE OF THE REGISTRAR  
115 Greenough Street  
Brookline, MA 02445  
(617)713-5006

**Education Verification Request**

LAST NAME (at time of graduation) \_\_\_\_\_ FIRST NAME \_\_\_\_\_

Date of Birth \_\_\_\_\_ Telephone Number \_\_\_\_\_

Year of Graduation \_\_\_\_\_ How many years attended BHS \_\_\_\_\_

Last Grade Completed (if non graduate) \_\_\_\_\_

\_\_\_\_\_  
Name of School or Business requiring documentation

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City or Town State Zip Code

Signature of student or authorized person \_\_\_\_\_

**Processing fee** must be in the form of cash, check or money order from a US Bank payable to BHS

- \$2.00 Processing fee for correspondence confirming graduation.  
Replacement diplomas are not available
- \$3.00 Processing fee for each **transcript** sent.  
Official copies are only sent directly to the school and/or program to which you are applying.
- \$3.00 **Unofficial Transcripts** may be requested for your own use.
- \$5.00 Processing fee for transcripts being mailed out of the country.

IF YOU ARE SENDING RECORDS TO MORE THAN ONE SCHOOL, PLEASE LIST THE  
ADDITIONAL SCHOOLS AND ADDRESSES ON THE REVERSE SIDE OF THIS FORM

Date of this Request \_\_\_\_\_ Deadline \_\_\_\_\_

*\*Incorrect information on requests can delay processing.*