

**Thompson Falls High School**  
*Home of the Blue Hawks*  
TRANSCRIPT / RECORDS REQUEST FORM

Date of Request: \_\_\_\_\_

Name: \_\_\_\_\_  
(name used while attending school)

Year of Graduation: \_\_\_\_\_

**SEND TRANSCRIPT TO:**

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

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

\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-mail (if electronic copy is to be sent): \_\_\_\_\_

Signature: \_\_\_\_\_

Phone Number: \_\_\_\_\_

You may submit this request by mail, fax, or e-mail:

Thompson Falls High School  
Attn: Nykolee Battles  
206 Haley Ave W  
Thompson Falls, MT 59873

Phone: 1-406-827-3561  
Fax: 1-406-827-9463  
Email: tfhs@blackfoot.net