

**KEANSBURG PUBLIC SCHOOLS  
KEANSBURG HIGH SCHOOL GUIDANCE DEPARTMENT  
140 PORT MONMOUTH ROAD  
KEANSBURG, N.J. 07734-1999  
FAX (732) 495- 5401  
(732) 787-2007ext. 4300  
KEANSBURG HIGH SCHOOL  
TRANSCRIPT REQUEST**

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

Name that I had when I attended school: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Month & Year that I graduated: \_\_\_\_\_

Where do you want the transcript sent: \_\_\_\_\_

\_\_\_\_\_  
Complete address/town/state & zip code must be provided

Phone/cell phone number where you can be reached: \_\_\_\_\_

A copy of your ID must be attached, no document can be sent without ID.  
Driver's License, etc

I, \_\_\_\_\_, give Keansburg High School  
(Name)

permission to release my transcript.

\_\_\_\_\_  
Must be signed

Mail with attached proper identification to: Keansburg High School  
140 Port Monmouth Road  
Keansburg, NJ 07734  
Attn: Guidance  
Or  
FAX: 732-495-5401

Date KHS Guidance sent this out: \_\_\_\_\_