



Milaca Public Schools

District 912
500 Highway 23 W.
Milaca, MN 56353-1147

Milaca High School Transcript Request Form

Payment for transcript(s) is due upon submission of request.

(There is no fee for current high school students. Current students should contact the Student Services Office for transcripts.)

Today's Date _____

Name _____

Year Graduated _____

Phone Number (in the event student must be contacted regarding request) _____

Number of transcripts: _____ (**\$2.00 per transcript – make check payable to Milaca High School**)

Name and address to which transcript(s) should be sent:

Check this box if you would like a receipt mailed to you and include your mailing address below:

The undersigned hereby authorizes the release of his/her high school transcript.

Signature of Student _____

Mail Completed Form and Payment to:

MHS Student Services Office

500 Hwy 23 West
Milaca, MN 56353

Phone: 320-982-7223

June, July, and August Mail to:

MHS Office

500 Hwy 23 West
Milaca, MN 56353

Phone: 320-982-7374