



## **Peekskill City School District**

*Our mission is to educate and empower all students to strive for excellence as life-long learners who embrace diversity and are contributing members of a global society.*

**Rodney Arthur, Principal**

**Naima Smith Moore, Assistant Principal**

**1072 Elm Street, Peekskill, NY 10566-3499**

**Phone: (914) 737-0201 ext.3524 Fax: (914) 737-2550**

**Email: [nsmithmoore@peekskillschools.org](mailto:nsmithmoore@peekskillschools.org)**

## **GRADUATES/FORMER STUDENTS OF PEEKSKILL HIGH SCHOOL**

### **REQUEST FOR TRANSCRIPT**

- Please complete all information and sign the bottom of the form in order for your request to be processed in a timely manner.
- Include a copy of your state issued picture identification (ID). Requests will not be processed without it.
- Please send the completed transcript request form with a copy of your state issued picture ID to:

**Mail:**

Peekskill High School  
Counseling Office  
1072 Elm Street  
Peekskill, NY 10566

**Fax:**

(914) 739-1086

**Email** (Form & ID as an attachment):

[gkhan@peekskillschools.org](mailto:gkhan@peekskillschools.org)

**NOTE:** If you are applying to a school and need an **OFFICIAL** transcript, we can mail it directly to the school. **Please indicate at the bottom of this form whether you will pick up your transcript OR provide us with the address of where you would like it sent.** If you pick it up or we mail it to you, the transcript **MUST** remain sealed in the Peekskill High School envelope to be official. We can give you a copy of your transcript for your use that will have “unofficial” stamped on it.

**PLEASE NOTE: TURNAROUND TIME FOR PROCESSING REQUESTS: 5 BUSINESS DAYS.**



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### PEEKSKILL HIGH SCHOOL ALUMNI TRANSCRIPT REQUEST

**1072 Elm Street Peekskill, NY 10566**

**(914)737-0201 Ext. 3519 (914)739-1086 Fax**

Name \_\_\_\_\_, \_\_\_\_\_ Maiden Name \_\_\_\_\_  
*Last First*

Date of Birth \_\_\_\_\_ Phone Number \_\_\_\_\_

Current Address \_\_\_\_\_  
*Street City State Zip Code*

PHS Graduate? ☐ Yes What Year? \_\_\_\_\_ ☐ No Last Year Attended? \_\_\_\_\_

*Please include a copy of your state issued picture ID with all requests.*

**Please check all that apply**

☐ **I am requesting the Official Transcript be released to the following:**

\_\_\_\_\_  
*College, Trade School, Agency or Employer*

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

☐ **I am requesting an Unofficial Transcript be released to the following:**

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Mailing Address, Fax Number or Email Address*

I understand that Peekskill City Schools cannot guarantee the confidentiality of any information that is sent via fax or email. I also understand Official Transcripts are mailed directly to the College, Trade School, Agency or Employer.

Signature \_\_\_\_\_