Red Oak High School  
Transcript Request

Email to: prattk@redoakschools.org

Or

Mail to: Counseling Department

Red Oak High School

2011 N 8th Street

Red Oak, IA 51566

Or

Fax to: 712-623-6613

|  |  |
| --- | --- |
| Name |  |
| Maiden Name |  |
| Current Address |  |
| City, State, Zip |  |
| E-mail |  |
| Date of Birth |  |
| Last Enrollment Date |  |

|  |  |
| --- | --- |
| Send Transcript to: | |
| Name of Institution |  |
| Street Address |  |
| City, State, Zip |  |
|  | |
| Fax Number |  |
| Attention to: |  |