



# PRESIDIO HS SENIOR CHECK OUT FORM

STUDENT NAME: \_\_\_\_\_

ID # \_\_\_\_\_

***This completed form due by <Insert Date Here>***

*Seniors: You must have all signatures below.*

CAFETERIA MANAGER: \_\_\_\_\_

LIBRARIAN: \_\_\_\_\_

ATTENDANCE MONITOR: \_\_\_\_\_

**TEACHERS:** By signing the below, you indicate this student has turned in all books and materials.

PERIOD	COURSE	TEACHER SIGNATURE
1		
2		
3		
4		
5		
6		
7		
8		
9		

<b>LAST STOP</b>	Counselor Initials _____
<b>COUNSELOR</b>	Walking at Graduation      YES      NO Final Transcript Request Form? _____ Presidio Senior Survey? _____
<b>CONTACT INFORMATION</b>	Email Address: _____ Cell Phone #: _____

STUDENT SIGNATURE: \_\_\_\_\_

<p>Students' permanent records will be kept for 60 years after graduation. Temporary records will be destroyed 5 years after graduation date. Students and parents may inspect, copy and, if need be, challenge the records that are in temporary and permanent files before they are sent to a new school or destroyed.</p>
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**Presidio High School**

**POST HIGH SCHOOL INFORMATION / FINAL TRANSCRIPT FORM**  
***(Required from all graduating seniors)***

**STUDENT NAME** \_\_\_\_\_

**ID #** \_\_\_\_\_

If you are attending a 2- or 4- year College or University in the Fall of 2018, please write the full name, city and state of the institution:

**Name of Institution:** \_\_\_\_\_

**I Applied thru Common App**

**City, State:** \_\_\_\_\_

**If the College/University is NOT in the United States, please provide the full address:**

If you are **NOT** attending a 2- or 4- year college/university in the Fall, please check one of the items below to indicate your post high school plans:

**Military Branch:** \_\_\_\_\_

**Vocational / Technical School:** \_\_\_\_\_

**Workforce:** \_\_\_\_\_

**Other:** \_\_\_\_\_

**STUDENT SIGNATURE:** \_\_\_\_\_

Please return this to the Guidance Counselor. If your plans change, it is your responsibility to contact your Counselor.