

REQUEST FOR RUSSELL COUNTY HIGH SCHOOL TRANSCRIPT

(SUBMIT THIS FORM TO THE RUSSELL COUNTY BOARD OF EDUCATION)

SECTION I: Education Information

Full Name: _____ Date: _____

Address: _____
(Street) (City) (State) (Zip Code)

DOB: _____ SS#: _____ Maiden Name: _____

Could your records be under any other name? _____
(Please List)

Last year of attendance: _____ Did you graduate? Yes _____ No _____ What Year: _____

Contact Phone #: _____ E-mail: _____

Father's Name: _____ Mother's Name: _____

SECTION II:

_____ Mail Transcript to: _____
(Name of college or business)

(Address)

(City, State and Zip Code)

_____ Fax Transcript to: _____
(Name of college or business)

(Fax number)

SECTION III: Certification Statement

I certify that I am _____ the person named in Section I of this document and I hereby authorize the release of the transcript to the organization indicated in Section II. I understand that the knowledge and willful request for acquisition of a record pertaining to any individual under false pretense is a Criminal Offense and could result in a fine to any individual found guilty of this offense.

(Student's Printed Name) (Student's Signature) (Date)

Attach a photocopy of a picture ID or have your signature notarized

For Office Use Only

Date Received: _____ Date Sent: _____ Sender's Signature: _____

Russell County Board of Education
PO Box 440

Jamestown, KY 42629

The Russell County Board of Education does not discriminate on the basis of race, color, national origin, religion, marital status, age, sex, or handicap as set forth in Title IX, Title VI, and Section 504.