



# TRANSCRIPT REQUEST FORM

## Permission to Release Information

### Instructions for processing your transcript request. Please print clearly.

- ✓ Transcripts released **after** outstanding financial obligations are met
- ✓ Transcripts will be sent to the institution listed by mail or fax
- ✓ Use a separate form for each institution requested
- ✓ Allow 10 business days for processing
- ✓ Photo ID required for pick-up - driver license or student ID
- ✓ \$10 charge for each copy requested

<b>Transcript Request Submission Options</b>			
1. <b>Mail-in:</b> Mail your request to FCTC, 2980 Collins Ave, St Augustine, FL 32084.	3. <b>Via Email:</b> email to <a href="mailto:transcripts@fctc.edu">transcripts@fctc.edu</a>	4. <b>Via Fax:</b> 904-679-3551.	
2. <b>Hand deliver:</b> Complete the form and submit for verification.			

**I hereby authorize FCTC to release the following portions of my student records to the institution listed below: (select all that apply)**

- |   |   |
|---|---|
| <input type="checkbox"/> CTE Program Transcript -\$10 per copy # of copies _____<br><input type="checkbox"/> Copy of OCP Certificates or Diplomas<br><input type="checkbox"/> Early Learning Coalition of SW FL | <input type="checkbox"/> Adult High School Completer Transcript<br><input type="checkbox"/> Enrollment Verification Letter<br><input type="checkbox"/> Other _____<br><small>(Other Official Documents released by FCTC may involve a service fee.)</small> |
|---|---|

**Students that require their GED diploma and transcripts must call the State of Florida Department of Education – 1-877-352-4331 or go to GED.com.**

Student Name		Former Names		
Current Address		City	ST	Zip
Email		Phone Number		
Student ID Number	Date of Birth	Last 4 of SSN		
Program		Year Attended		

**FCTC does not offer Un-official transcripts. Transcript requests to other institutions will be sealed and marked Official. PLEASE NOTE: Transcripts that you choose to pick up at FCTC are usually not accepted at other institutions as Official.**

Will pick-up – you will receive a phone call when your transcript is ready to be paid and picked-up – Phone: \_\_\_\_\_

Send via mail to: Attn: \_\_\_\_\_

Name of Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

Send via fax to: Attn: \_\_\_\_\_

Name of Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_ Zip \_\_\_\_\_

Fax # \_\_\_\_\_

**STUDENT SIGNATURE REQUIRED BEFORE PROCESSING** \_\_\_\_\_ **Date** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Processed by \_\_\_\_\_ Date \_\_\_\_\_ Payment method \_\_\_\_\_