

Jefferson County School District

Student Transcript / Records Request



Complete the information requested below. **A signature is required.** The requested records will be mailed or available for pick up **3 DAYS** after receipt of payment.

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) gives parents certain rights with respect to their children's educational records. These rights transfer to the student when he or she reaches the age of 18, or attends a school beyond the high school level. **Parents of students 18 years or older CANNOT request the student's records.** The student must sign this form in order for the request to be processed.

Jefferson County School District
ATTN: Transcript Request
MAIL TO: 1490 W. Washington Street
Monticello, FL 32344

PRICES:

Official Transcript (Includes the seal of the Jefferson County School Board and Official's Signature)	\$3.00
Mailing Fee	\$1.00
Other Student Records	\$0.15 per page

Students are required to submit payment before their request is to be processed. Please provide exact cash or a money order made out to the Jefferson County School District and send to the address listed above.

Name(s) used when attending school: _____

Current Name (if different than above): _____

Current Address: _____

Student DOB: _____ Student Social Security Number: _____

Student ID # (If known): _____ Current Phone Number: _____

Last Year in School: _____ Did you graduate? Yes No If no, indicate last grade attended: _____

Name of the last school you attended in Jefferson County (Howard, Jefferson High, etc.) _____

I would like to pick-up my transcript.

I would like my transcript sent to: _____

Please indicate the number of copies you are requesting: _____

Purpose of Request: Employment Education Personal Immigration Other _____

I certify, under penalty of perjury, pursuant to Florida Statute Section 92.525, that I am the former student requesting my records, or the parent/guardian of a former student (who is under the age of 16 or meets other statutory requirements) requesting records of said student.

Signature of Former Student

Date

Signature of Parent/Guardian

Date