



The School Board of Broward County
Records Retention
Transcript Request

7720 W. Oakland Park Blvd., 3rd Floor
 Sunrise, FL 33351

Instructions: This form is for students requesting transcripts from 7 years ago or prior. If you attended within the last 7 years, contact your last school. Mail this form and **copy of identification** to Records Retention, to address shown above. Fee for each copy is \$2.00 for official transcript (College, Employment, SS, etc.) OR \$7.00 for certified transcript (Immigration, Subpoenas, etc.), cash or money order only made to: The School Board of Broward County. No personal checks accepted. **All request received incomplete or unacceptable will be returned immediately.**

Check one:
 OFFICIAL __CERTIFIED__

*This form is not for GED request.

*Student Name _____ *DOB _____

Married/Other Name _____ SSN _____

*Home Phone _____ Work _____ Cell _____

E-Mail Address _____ *Number of Copies: _____

*Last public BROWARD County school (K-12, VoTech) _____

*Last year in school _____ Did you graduate? YES OR NO If no, last grade attended _____

Program Title (if applicable) _____ Attendance Dates _____

Did you COMPLETE the program? YES or NO, Elem \$2__ Middle \$2__ High\$2__ VoTech\$2__

Mail to:

Name _____

Address _____

City _____ State _____ Zip _____

Mail to:

Name _____

Address _____

City _____ State _____ Zip _____

Authorization Statement and Authorized Signature

I certify, under penalty of perjury, pursuant to Florida Statute Section 92.525, that I am the former student requesting my records. I hereby authorize the release of records or information as instructed above.

*Student Ink Signature _____

Date _____

*Attach **PHOTO ID** before mailing

***REQUIRED**