

Student Records/Transcript Request Form

There is a processing fee for transcript request & Education Verifications.

Student fee of \$3.00 cash or money order only. Agencies fee of \$10.00 by check. Payment is due before transcripts can be released.

Please print clearly, complete every question and form must be signed.

Date:				
Name:(First)	(Middle)		(Maiden)	(Last)
Name of School Attended:				
Last year you attended/gra	duated:			
Did you graduate?	_ Yes	_ No	Date of Birth:	
Phone number where you	can be reached	d:		
Signature of Student/Leg	al Guardian: _			
(Please note: Transcripts of mailed directly to the school Check if transcript will be p	ol or picked up	at Centra	al Office.)	·
School Name and complete	e mailing addre	ess to ma	ail transcript or e-ma	il/fax #.:

The Records Department will call you when your transcript is ready to be picked up at the Central Office. Transcripts can only be picked up by the person the transcript is for or by a parent. Identification is required to pick up a transcript.

<u>Form of payment</u>: Students bring exact cash or Money Order made out to "Bartow County School" at time of request or when transcripts are picked up in person. Agency Checks made out to "Bartow County School System."

E-Mail completed form to: Student.records@bartow.k12.ga.us

FAX form to: 770-387-5408

Mail to: Bartow County School, PO Box 200007, Cartersville, GA 30121

Bartow County BOE requires at least 5 business days to process all transcripts Bartow County School System is not responsible for delayed transcripts due to inaccurate information on this Request form.