



## LPN TRANSCRIPT REQUEST FORM

BOCES CONSORTIUM OF CONTINUING EDUCATION

Continuing Education, 4937 Spring Rd, P.O. Box 168 Verona, NY 13478-FAX (315)361-5810

NAME	PREVIOUS NAME	
STUDENT ID#(Social Security Number)	BIRTHDATE	
SITE WHERE CLASS WAS ATTENDED	GRADUATION DATE	
CURRENT ADDRESS	PHONE	
CITY/STATE/ZIP	VISA/MASTERCARD/DISCOVER #	
EMAIL ADDRESS:		
NAME ON CARD IF DIFFERENT FROM ABOVE:	EXP. DATE	
	SECURITY CODE	
List Visa, or MasterCard number, name on card, expiration date and Security Code (three digits on back of card) only if paying with credit card. Check or money order also accepted.		
NUMBER OF TRANSCRIPT(S) _____. Please note it is the student's responsibility to determine the number of transcripts required for each desired organization.		
SELECT ONE OF THE FOLLOWING OPTIONS:		
<input type="radio"/> I WILL PICK UP THE OFFICIAL TRANSCRIPT(S) \$10.00 fee per transcript. <input type="radio"/> I WILL PICK UP MY UNOFFICIAL TRANSCRIPT(S) \$10.00 fee per transcript. Photo ID will be required at the time of pick up. Transcripts will only be held for 30 days. Any transcript not picked up after 30 days will be destroyed and you must re-order and pay additional transcript fee.		
<input type="radio"/> MAIL OFFICIAL TRANSCRIPT(S) TO ADDRESS SPECIFIED \$10.00 fee per transcript. Please print clearly. <input type="radio"/> MAIL UNOFFICIAL TRANSCRIPT(S) TO ADDRESS SPECIFIED \$10.00 fee per transcript. Please print clearly.		
Attention/ Name of organization		
Street address		
City	State/Zip Code	Country/Province(Canada only)
<input type="checkbox"/> FAX UNOFFICIAL TRANSCRIPT TO (\$10.00 fee per transcript): Please print clearly. Name/Organization <span style="float: right;">FAX Number(include area code)</span>		
<b>Authorization Signature Required: I authorize release of my transcript as directed on this BOCES Transcript Request Form.</b>		
Date:	Signature:	
Office Use Only:	Processed by:	
Amount Charged:	Date Processed:	

Mail the completed form to:  
 BOCES Consortium of Continuing Education  
 4937 Spring Road, P.O. Box 168  
 Verona, NY 13478

FAX to:  
 (315) 361-5810

## How to Order a Transcript

Transcripts may be ordered in the following ways:

**By Mail or Fax:** to the Continuing Education Office. You must submit a completed Transcript Request Form and payment by Cash, Check, Money Order, Visa, MasterCard or Discover in the amount of \$10.

No transcript will be issued for any student who has an unsatisfied financial obligation.

Official transcripts are sent directly to a college, employer or other agency and bear the BOCES seal. Student copies may be sent directly to the student and are identified as such. The fee for either type of transcript is the same.

In accordance with federal law (The Family Educational Rights and Privacy Act), student transcripts are issued only at the written request of a student. A transcript will not be released without the student's signature appearing on the request. Transcript requests are not accepted by telephone.

Request will be returned unprocessed if the form is incomplete

Processing time is seven business days from the date the request is received by the Continuing Education Office.