

# TJHSST FORMER STUDENT RECORDS REQUEST

Graduation Year/Last Year Attended \_\_\_\_\_ (If more than 5 years ago, visit the [FCPS Transcripts and Records web page](#))

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Request Date	Due Date <small>*allow 10 school days to process</small>	Send copies requested to the following location(s) : <b>(attach an additional sheet for more than two addresses)</b>	Fee (\$5)	Date transcript processed	Date mailed
		Name Address City State                          Zip			
		Name Address City State                          Zip			

**Signature\*:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Contact e-mail:** \_\_\_\_\_

\*We cannot process the request without a signature. When submitting via mail, include a copy of your driver's license (or other government issued ID) to establish your identity.

*I give permission for \_\_\_\_\_ to pick up my records with valid ID.*  
*First and Last Name*

**Fee:** \$5.00 for each copy requested  
Payment may be made thru MySchool Bucks at the following link: <https://tinyurl.com/FormertJStudentPayment>

Per FCPS policy and the Family Educational Rights and Privacy Act (FERPA) student records are only available to those who have authorization from the student or parent, guardian or responsible person if the student is under 18 years of age. **If the student is 18 years of age or older, school records will not be released to a parent, guardian, or responsible person without the student's written consent.**