

**JEFFERSON COUNTY PUBLIC SCHOOLS  
DEPARTMENT OF PUPIL PERSONNEL  
STUDENT TRANSCRIPTS  
PO BOX 34020  
LOUISVILLE, KY 40232-4020**

In order to process a transcript request for a student 18 or older, please *PRINT* and complete this form. Your request can be mailed to the above address or delivered in person to our office located at 4309 Bishop Lane. Your request will be returned if incomplete or payment is not included.

Student Name \_\_\_\_\_  
(Provide name used during attendance in school, i.e., maiden name)

Date of Birth \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
(Mth) (Day) (Year)

Name of School Last Attended \_\_\_\_\_

Year of Graduation \_\_\_\_\_ or Last Year & Grade Attended \_\_\_\_\_

Please check one:  High School Transcript \$5.00 enclosed

Full Transcript (Elementary thru High School) \$8.00 enclosed

**Required: Picture ID with signature  
Cash, Check or Money Order**  
(made payable to Jefferson County Public Schools)

Indicate where the documentation is to be mailed by providing a mailing address or provide a pre-addressed return envelope.

Mailing address:

Name/Business \_\_\_\_\_

Attn: \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_  
**Signature of student**

\_\_\_\_\_  
**Date**

Your request will be processed within 48 hours, provided all of the above information is complete and correct. You will be contacted if we have difficulty locating your record. **To verify receipt of your documentation you will need to send it by certified mail.** Time does not permit us to verify requests.

Please provide a daytime phone number where you can be reached \_\_\_\_ - \_\_\_\_.