



# Transcript Request Form Instructions

## Requesting a Transcript

In accordance with the Family Educational Rights and Privacy Act, only the individual that attended coursework at Jersey College may request a copy of his/her transcript or direct the release of a transcript to a third-party. Transcripts may be obtained by completing the Transcript Request Form and providing supporting documentation and payment.

To verify student identity, Jersey College requires students requesting transcripts to provide one (1) form of identification with their request. Acceptable forms of identification are: passports, birth certificates and driver's licenses. Where a student has changed his/her name and Jersey College has not previously received legal documentation detailing the name change, the student must also submit a copy of one of the following legal documents to verify the change in name -- marriage license/certificate, court order or divorce decree. Individuals are advised that transcripts will not reflect changes in legal names that occur after individuals leave the college.

The signed Transcript Request Form, along with payment, proof of identification and proof of name change (if necessary) may be dropped off, faxed or mailed to a campus. All transcript requests must be signed. Unsigned transcript request forms will not be processed.

## Transcript Fee of Form

There is a \$5 fee for each copy of a transcript. Form of payment is credit card, money order or cash. No personal checks can be accepted for processing of transcript requests.

## Where to Send Transcript Form and Fee

Transcript forms and fees should be mailed, faxed<sup>1</sup> or personally delivered to the campus that the individual attends or attended. The mailing addresses and fax numbers for our campuses are available at [www.jerseycollege.edu/contact-us](http://www.jerseycollege.edu/contact-us).

## Other Information

We will use reasonable efforts to process all transcripts within three to five business days. Please note that students must be in good financial standing with Jersey College in order to receive a transcript. If a student's account is not current, the transcript request will be denied.

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<sup>1</sup> If transcript request form is faxed, you must complete the credit card authorization form for processing of the transcript fee.



## Checklist for Transcript Request

- ☐ Transcript Request Form (Signed)
- ☐ One (1) Form of Identification (Passport, Birth certificate or driver's licenses)
- ☐ Change of Name -- Proof of Name Change if not previously provided to Jersey College (Marriage license/certificate, Court order or Divorce decree)
- ☐ \$5.00 Payment (money order, made payable to Jersey College, credit card (complete credit card form) or cash (if in person))

Drop off, fax or mail above documentation to your campus. The mailing addresses and fax numbers for our campuses are available at [www.jerseycollege.edu/contact-us](http://www.jerseycollege.edu/contact-us).

Jersey College will use reasonable efforts to process all transcripts within three to five business days. Please note that students must be in good financial standing with Jersey College in order to receive a transcript. If a student's account is not current, the transcript request will be denied.



\$ \_\_\_\_\_

Signature:	Date:
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# JERSEY COLLEGE TRANSCRIPT REQUEST FORM

Complete this form and sign below. Please print clearly.

## Student Information

Name: (First Middle Last Jr., etc.)			
Former Legal Name (if not same as current): (First Middle Last Jr., etc.)			
Address:		City:	State: Zip Code:
Email address:			
Home Telephone: ( )		Work Telephone: ( )	Mobile (Cell) Telephone: ( )
Social Security #: - -		Date of Birth (MM-DD-YY): - -	

**Note: If the name you provided above does not match Jersey College's records, you must submit a copy of one of the following legal documents detailing your name change: marriage license/certificate, court order, or divorce decree.**

## Program Information

Campus Attending/Attended (City and State)	Name of Program Attending/Attended		
Program Start Date (Month and Year)	Enrollment Status (check one) <input type="checkbox"/> Currently Enrolled <input type="checkbox"/> Leave <input type="checkbox"/> Graduate <input type="checkbox"/> Withdrawn		Graduation Date (Actual or Projected)

## Transcript Information

- ☐ **OFFICIAL** Transcripts (for Employers and Educational Institutions) (Requestor may pick up **OFFICIAL** transcripts, but they must have a printed address – All **OFFICIAL** transcripts are mailed via USPS):

Attention:			Number of copies: ____
Address:			
City:	State:	Zip:	

- ☐ **UNOFFICIAL** Transcripts (for students) ☐ Will pick up transcripts ☐ Mail transcripts to:

Attention:			Number of copies: ____
Address:			
City:	State:	Zip:	

I hereby affirm that I have read and reviewed all information in this form. In addition, I hereby affirm that all information supplied on this form by me is complete and accurate. I understand that giving false information may be shared with licensing bodies and subject me to disciplinary actions. According to the Family Educational Rights and Privacy Act (FERPA) a student's record may not be released unless written authorization has been provided to our institution by the student. By signing and dating the section below, you are allowing Jersey College to release your educational transcript. **If this form is not signed by the student, the request will not be processed or granted.**

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY		
Verified by:	Date Processed:	Financially Cleared: <input type="checkbox"/> YES <input type="checkbox"/> NO