



Banks County High School
 Office of the Registrar
 1486-A Historic Homer Highway
 Homer, GA 30547
 Phone: 706-677-2221
 Fax: 706-677-2688
 kpatterson@banks.k12.ga.us

OFFICE USE ONLY	
Date Received	_____
Amount Paid	_____
Date Processed	_____

TRANSCRIPT REQUEST FORM

TRANSCRIPT FEE: \$3.00 per transcript
A minimum of 4 days notice is necessary for all transcripts.

Mail completed form, a copy of your driver's license/ID, and \$3.00 (cash or money order) per transcript to the address listed above or _____ Please contact me at the number listed below and I will pick up my transcript in the Banks County High School front office.

*Transcripts not picked up within 30 days will be destroyed.

Name: _____ Name while attending BCHS if different: _____

Year of Graduation: _____ DOB: _____ Last 4 Digits of SSN: _____

Daytime Phone Number: _____ Email: _____

Under the Family Educational Rights and Privacy Act, we are required to obtain your written permission in order to forward a transcript to other schools, colleges, universities, organization, or prospective employers. **You must include a copy of your driver's license or ID.**

I affirm that I am the above named student. In compliance with the Family Education Rights and Privacy Act of 1974 (as amended), I hereby give my written consent and do therefore authorize Banks County High School to release my student records as noted.

Signature: _____ Date: _____

***A copy of your driver's license or government issued ID must accompany this form or your request will not be processed.**

Include test scores (Circle one) Yes or No

Please list addresses below if transcripts are to be mailed:

School/Agency: _____ Address Line 1: _____ Address Line 2: _____ City: _____ State: _____ Zip: _____	School/Agency: _____ Address Line 1: _____ Address Line 2: _____ City: _____ State: _____ Zip: _____
School/Agency: _____ Address Line 1: _____ Address Line 2: _____ City: _____ State: _____ Zip: _____	School/Agency: _____ Address Line 1: _____ Address Line 2: _____ City: _____ State: _____ Zip: _____