

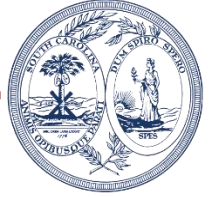


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Executive Director

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Henry McMaster  
Governor



## FORMER STUDENT RECORDS REQUEST FORM

IN ORDER TO LOCATE THE STUDENT RECORD, PROVIDE THE FOLLOWING INFORMATION:  
(Required information indicated in bold-face)

*Student's Name While Attending School*

\_\_\_\_\_

Last (Maiden)	First	Middle
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*Student's Address While Attending School*

\_\_\_\_\_

*Student's Current Address/Email Address*

\_\_\_\_\_

Date of Birth \_\_\_\_\_ Approximate Date of Last Attendance \_\_\_\_\_

Reason for Request \_\_\_\_\_

Signature (needed to process request)*	Date	Contact Phone
*When submitting, include a copy of your driver's license (or other government issued ID) to establish your identity.		

Please send the records via:    US Mail (Current address)     Email  \_\_\_\_\_

- Transcript of Academic Records/Withdrawal Grades
- GED Information

<b>SC Department of Juvenile Justice Use Only</b>
Date Request Received: _____
Received By: _____
Date Request Completed: _____
Number of Pages: _____

Requests should be submitted to [transcripts@djj.sc.gov](mailto:transcripts@djj.sc.gov) or via fax to (803)896-5953. Please allow 48 hours for processing. Should you need additional assistance, please dial (803)896-5952.