



Arlington Public Schools
Attention: Records Clerk
2110 Washington Boulevard
Arlington, VA 22204

Phone: 703.228.6180/6062 Fax: 703.228.2433

OFFICE USE ONLY
Received By: _____
Date Rec'd: _____
Date Sent: _____

TRANSCRIPT REQUEST

OFFICIAL COPY (with seal)

UNOFFICIAL COPY (no charge)

Name While Attending School:

Last (Maiden): _____

First: _____ Middle: _____

Date of Birth (MM/DD/YYYY): _____ / _____ / _____

Last Arlington Public School Attended: _____

Last year in attended: _____ Graduated Withdrew

Did you participate in the Adult Education Program: Yes No

Did you take a GED Exam: Yes No

If so, to obtain a copy of your GED please go to the following website: <https://ged.com/>
For additional information you may contact Jerri Lynn Young at 703-228-7220.

3rd Party Pickup (if applicable): _____

I authorize the person named as 3rd party to pick up my transcripts (The designee above must present a picture ID).

Send the transcript(s) to the following location(s):

If you have more than two locations to send the transcript, please attach an additional sheet.

1. _____	2. _____
_____	_____
_____	_____
_____	_____
_____	_____

Signature: _____ Date: _____

Please indicate a phone number or an e-mail address at which you may be reached.

Phone: _____ E-mail: _____

Fee: \$4.00 for each official transcript
Please pay with Cash, Money Order or Certified Check made
Payable to: Arlington Public Schools
Send this form along with a photocopy of your government issued
photo ID and any fees to the above address