P. O. Box 280 167 Werz Industrial Drive Newnan, Georgia 30264 (770) 254-2810 ext. 2077

Coweta County Board of Education

COMMITTED TO STUDENT SUCCESS

RECORDS CENTER REQUEST

The following information is required to assist in locating the requested record. Please complete and return this form to the above address.

***** Please note that to process a request the Records Center will have 3 business days to respond*****

Please print full name (include maiden/others) as used in school:

Last Name	First Name	Middle Name	Maiden or Other

Educational Verification: Date of Graduation:	Name of High School:	Date of Withdrawal:	Last Coweta County School Attended:

Employment Verification:

Location:	Year(s) of Employment:

Date of Birth:				Date of Request:		
Month	Date	Year		Month	Date	Year

Student/Parent: A processing fee of $3.00 must be received on the date of the request for each official copy of a student's transcript(s)/record(s). **(Cash/Money Order/Cashiers Check only) No personal checks, no debits, and no credit cards.**

Business/Agency: A processing fee of $5.00 must be received on the date of the request for educational verification and/or employment verification. **(Business Check/Money Order/Cashiers Check only)**

Number of copies requested: _____

Please provide name, address, and telephone # of the agency/person to receive the requested records.

(1) _____
_____
_____

(2) _____
_____
_____

Must present proof of identification: **Picture ID** (Driver's License, Employment ID Badge, Passport, State ID)
(Attach a copy of your ID when mailing this request).

Signature of authorized person (student if 18 or older), otherwise parent/guardian: _____

Name of the authorizing person (print): _____

Telephone number of the authorizing person (include area code): _____

Current mailing address of the authorizing person: _____
Street / P.O. Box City State Zip Code

DO NOT WRITE BELOW THIS LINE.

FOR RECORDS CENTER USE ONLY

Proof of Identification: Driver's License _____ (attach copy) State ID _____ (attach copy)
Employment ID _____ (attach copy) Passport _____ (attach copy)

Carried by Hand: _____ Fax to: _____ Mailed to: _____
Date: _____ Date: _____ Date: _____

Amount Paid: $_____ ( ) Cash ( ) Money Order ( ) Cashiers/Business Check ( ) Fee exemption (government / state / educational institute)