



The Comenius School Transcript/Document Request Form

Check the document(s) you are needing: Driver's Permit Form (SF-1010) Pick-Up Email
 Transcript or School Records
 Diploma (\$35)

Student Name: _____

Date of Birth: _____ Year of High School Graduation: _____

Note: Requests made for withdrawn or graduated students will incur a \$15 fee per transcript recipient.

Circle reason for Request: College School Transfer Insurance Other

Names & Addresses/Email Addresses of Recipient*:

1) Name: _____

Email Address: _____

Address: _____

2) Name: _____

Email Address: _____

Address: _____

3) Name: _____

Email Address: _____

Address: _____

* Requests will not be processed unless the full school name and address has been provided.

* First 3 recipients are at no charge for currently enrolled students; **additional recipients are \$15** payable by Venmo or by check to TCS & mailed to: 1021 Windcross Court, Franklin, TN 37067 Attn: Records

* **Withdrawn** or **Graduated** students must submit \$15 per recipient along with this completed form.

Is this request for an immediate school transfer? (Circle One) **Yes** / **No**

School Name: _____

School Email Address: _____

All requests will be date stamped upon receipt in our TCS office. Requests will be processed in the order they are received and mailed/emailed within 10 business days of receipt/payment.

Signature of Person Requesting Transcript: _____

Date: _____ Relationship to Student: _____

(If a student is 18 years or older, he/she must sign the request or TCS will not accept the request.)