

Former Student Records Request

Per FERPA regulations parents cannot request records for graduates.

Student's Name While Attending School:

Last _____ First _____ Middle _____

Date of Birth: Month _____ Day _____ Year _____ FCPS ID, if known _____

Exit Status: _____ Graduated _____ Withdrew **Year last attended:** 20_____

Requesting copies of the following records (check all that apply)

___ Transcript ___ Immunization ___ Other _____

___ Diploma Replacement (See Transcript Assistant for additional form and fees)

Reason for Request _____

Signature _____ **Date** _____

Phone (_____) _____ **Email** _____

Choose ONE form of delivery:

Pick up from HHS Student Services.

I give _____ permission to pick up my records.

OR

Mail copies to: CNU GMU JMU UMW ODU UVA VCU VT WM
NOVA Radford Longwood

(If not listed above please provide name and address. One form may be used for multiple requests)

Name of business or school: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Allow two weeks processing time.
email form to: aedas@fcps.edu

Fee: \$5.00 for each copy requested.

Transcripts are processed as official transcripts. Payment made by CASH or CHECK (payable to Herndon High School) may be brought or mailed to the school with the form. Mail to: Herndon High School, Transcript Office, 700 Bennett Street, Herndon VA 20170

For office use only...do not write below line

Date received _____ ***Date request picked up/mailed*** _____ ***Initials*** _____ ***Fee*** _____