



# Grant County Public Schools Request for Educational Records

## CURRENTLY ENROLLED STUDENTS MUST CONTACT THEIR SCHOOL OF RECORD

Failure to complete the following information will cause a delay in processing of your request.

FULL Name at the time enrolled in school

Last:  First:  Middle:

Married Name:  DOB:  SSN:

School last attended: Grant County High  Eagle Creek Academy  Grant County Middle

CHECK ONE of the following: Year of graduation   Last Year attended

Records you are requesting  Transcript  Other:

Telephone number where you can be reached

Chose the format in which should this request be returned; pick up or mailed are official; email and fax are not:

Pick Up (By whom if not the person requesting the records)

Mailing: Name:

Street:  Apt Number

City/ State:  Zip Code:

Fax Number:  Name:

E-mail Address:  Name:

Verification of Drivers License or Picture ID

I certify that I am at least 18 years of age or a graduate making the above request concerning **my own** school records, or if a minor I am the parent/ legal guardian having custody of the student named above. **Due to Federal regulations a parent can only request this information if individual is under the age of 18 years.**

Date:

Student/Graduate signature  
Or if a minor parent/legal guardian signature

Return to [linda.justice@grant.kyschools.us](mailto:linda.justice@grant.kyschools.us) or fax to 859-824-3508 Attn: Linda Justice