

# REQUEST FOR STUDENT RECORDS INSTRUCTIONS

#### In order to request your record, the following are required:

1. Completed Request for Student Records.
2. Copy of a valid photo ID (i.e., driver license, DMV-issued ID card, passport, military ID) if you are picking up your record in person. If you do not have identification, please call our office. If you are not completing the request in person, please complete and return the Identity Verification Form along with the Request for Student Records.
3. There is a $5.00 fee per transcript requested. **Payment must be received prior to release of all records**. Roanoke City Public Schools will accept cash or money order payable to *Roanoke City Public Schools*.

#### **Complete** submissions will be processed within 3-7 business days of request. Please make sure that you have signed/dated, payment has been made, and that you have provided all required information and documentation so there will be no delay in processing your request.

**Mail requests to:** Roanoke City Public Schools

#### Student Records Department

P.O. Box 13146 Roanoke, VA 24031

**Fax requests to:** 540-853-1250

**E-Mail requests to:** rcpsrecords@rcps.info

**Pick-up hours:** Monday through Friday 8 am to 5 pm

#### Administrative Office – 24-Hour Notice 40 Douglass Avenue NW

Roanoke, VA 24012

**STILL HAVE QUESTIONS?**

 **540-853-1464 or ** **rcpsrecords@rcps.info** ****[**www.rcps.info**](http://www.rcps.info/) **540-853-1393**

[w](http://www.lcps.org/Page/123346)



**REQUEST FOR STUDENT RECORDS**

Roanoke City Public Schools, 40 Douglass Avenue NW, Roanoke, VA 24012

##### STUDENT INFORMATION

Name While Enrolled:

Last First Middle

If Applicable, Current Last Name: Date of Birth:

MM / DD / YYYY

Exit Status(check one): Graduated Withdrew

Year Last School Attended

Current Address, Telephone Number, Email:

Street Address City State Zip (Area Code) Telephone Number Email

**RECORDS REQUESTED** (check all that apply)

**Note: Diplomas and diploma copies are not available.**

 Transcript ($5 per transcript)  Testing (SAT, ACT)  Immunization  Other (please specify) Reason for Request

##### RECIPIENT INFORMATION

 **Pick Up** Official - # of copies

Unofficial - # of copies

 \* **Mail** Official - # of copies Unofficial - # of copies

Pick Up Location: Administration Bldg. 40 Douglass Ave. NW Recipient Name

Roanoke, VA 24012

If Applicable, Name of Designee to Pick Up Name of Receiving School, Company, Organization

Record (first/last name):

Address

**(ID Required)** City State Zip

 \* **FAX**  \* **Electronic Delivery**

(Area Code) FAX Number Recipient Email Address

Recipient Name Recipient Name

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Name of Receiving School, Company, Organization Name of Receiving School, Company, Organization

##### \*  Check here if requesting more than 1 copy and attach a sheet to this form with additional recipient info.

Please indicate how payment is being made:  Cash  Money Order

#####  I authorize Roanoke City Public Schools to release my records as indicated herein.

**Signature of Student Date**

**---------------------------------------------------------------OFFICE USE ONLY--------------------------------------------------------------------------**

**Type of Identification Used: Fee Paid: Receipt #: Date:**

**IDENTITY VERIFICATION FORM**

**List of Acceptable Documents (NOTARY SEAL IS REQUIRED, IF MAILED)**

1. U.S. Passport (un-expired or expired)
2. Certificate of U.S. Citizenship (INS Form N-560 or N-561)
3. Certificate of Naturalization (INS Form N-550 or N-570)
4. Un-expired foreign passport with 1-551 stamp or attached INS Form 1-94 indicating unexpired employment authorization.
5. Alien Registration Receipt Card with photograph (INS Form 1-151 or 1-551)
6. Un-expired temporary Card (INS Form 1-688)
7. Un-expired Employment Authorization Card (INS Form 1688A)
8. Un-expired Reentry Permit (INS Form 1-327)
9. Un-expired Refugee Travel Document (INS Form 1-571)
10. Un-expired Employment Authorization Document issued by the INS which contains a photograph
11. Legal Identity Card with Photo issued by a state agency such as a Department of Corrections ID
12. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address
13. ID card issued by federal, state, or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address
14. Valid marriage certificate
15. Voter's registration card
16. U.S. Military card or draft record
17. Military dependent's ID card
18. U.S. Coast guard Merchant Mariner Card
19. Native American tribal document
20. Driver's license issued by a Canadian government authority
21. Original Birth Certificate
22. Social Security Card
23. Medicare /Medicaid Card
24. Other vehicle operator's license like pilot's license

**Notary Seal**

*(\*Valid State Certificate of License can be provided in lieu of Seal)*

*City / County of State of*

*I, \_, a notary public for the jurisdiction aforesaid, do certify that*

 *, whose name is signed to the writing on the previous page has acknowledged the same before me on this day of in the year of .*

*Notary Public*

*My commission expires:*