



High School Transcript Request

(see reverse for instructions)
Central Admissions And Records
J. Sargeant Reynolds Community College
P.O. Box 85622
Richmond, VA 23285-5622

JSRCC Applicant Information: Please Print

Student's SSN: _____ Birth Date (MONTH|DAY|YEAR): ____/____/____

Last Name First Name MI Jr.,3rd

Former Last Name

Street Address City State Zip

Daytime Phone#: _____ Email Address: _____

Intended term of admission at J. Sargeant Reynolds Community College:

FALL TERM (Aug - Dec) 200 ____ SPRING TERM (Jan - May) 200 ____ SUMMER TERM (May - July) 200 ____

High School Name: _____ Date of Graduation: _____

X SIGNATURE OF APPLICANT: _____ DATE: _____

Signature of Parent or Legal Guardian is required if student is less than 18 years old

School Information: To be completed by your high school

This student will graduate on _____/or, has graduated on _____ Grade Point Average:* _____
month/year month/year

Grade Scale Used: 90-100 = A 95-100 = A 93-100 = A 3.0 = A 4.0 = A 5.0 = A Other: _____

X COUNSELOR/SCHOOL OFFICIAL SIGNATURE: _____ PHONE#: _____ DATE: _____

Detach Here



College Transcript Request

(see reverse for instructions)
Central Admissions And Records
J. Sargeant Reynolds Community College
P.O. Box 85622
Richmond, VA 23285-5622

JSRCC Applicant Information: Please Print and send to your previous colleges.

Student's SSN: _____ Birth Date (MONTH|DAY|YEAR): ____/____/____

Last Name First Name MI Jr.,3rd

Former Last Name

Street Address City State Zip

Intended term of admission at J. Sargeant Reynolds Community College:

FALL TERM (Aug - Dec) 200 ____ SPRING TERM (Jan - May) 200 ____ SUMMER TERM (May - July) 200 ____

I am requesting: Transcript showing work completed to date Final Transcript

School Information:

College Name: _____ Location: _____

X SIGNATURE OF APPLICANT: _____ DATE: _____

Instructions for High School Transcript Request Form

Student: Please complete and sign the Applicant Information section.

1. Mail this form to your high school.

Graduates of more than five years from these school systems should mail this form to the appropriate address below:

Richmond City Schools
Student Records Office
301 North 9th Street
Richmond, VA 23219
(804) 780-7810

Henrico County Schools
Student Records Office
P.O. Box 23120
Richmond, VA 23223
(804) 652-3855

Chesterfield County Schools
Student Records Office
P.O. Box 10
Chesterfield, VA 23832
(804) 768-7560

2. If you received a Virginia GED, mail this form to the address listed below. Virginia Department of Education charges a \$5.00 fee for transcripts and a \$10.00 fee for both a transcript and duplicate certificate. Please make the check or money order payable to Virginia Department of Education. Credit cards are not accepted at this time. Requests that do not include fees will be returned to the sender without processing, and will include a written notification of the required fees. Including a self-addressed envelope with each request is recommended as it helps to process requests more quickly:

Virginia Department of Education
Adult Education Service - GED
P.O. Box 2120
Richmond, VA 23218-2120
(804) 371-2333

School Official:

Please complete the school information, attach this form to the front of the high school transcript, and mail to:

Central Admissions And Records
J. Sargeant Reynolds Community College
P.O. Box 85622
Richmond, VA 23285-5622

If there is any money due, please contact student.

Detach Here

Instructions for College Transcript Request Form

Student:

If you have attended any college or university, complete and sign the Applicant Information section on the front of this form and mail it to the registrar's office at each college or university you have attended (other than J. Sargeant Reynolds Community College). You may duplicate this form if you have attended more than one college. You should send any transcript request fees required by the college(s) with this form to prevent delays.

School Official:

Please attach this form to the student's official transcript and return it to:

Central Admissions And Records
J. Sargeant Reynolds Community College
P.O. Box 85622
Richmond, VA 23285-5622