

THOMAS JEFFERSON ARTS ACADEMY
TRANSCRIPT REQUEST

*Please complete this form and email to our office secretary,
Jackie Magliano, (magliagi@epsnj.org).*

*****PLEASE NOTE – OFFICIAL TRANSCRIPTS MUST BE MAILED DIRECTLY TO THE SCHOOL/EMPLOYER AND MAY NOT BE ISSUED TO A GRADUATE OR STUDENT. ONLY TRANSCRIPTS STAMPED UNOFFICIAL MAY BE GIVEN TO THE GRADUATE OR FORMER STUDENT*****

PLEASE PRINT CLEARLY – TODAY'S DATE _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

MAIDEN NAME (IF PRESENTLY MARRIED) _____

DATE OF BIRTH _____ YEAR OF GRADUATION/LEFT _____

LAST 4 DIGITS OF SOCIAL SECURITY NUMBER _____

PLEASE CHECK THE HOUSE YOU ATTENDED (IF APPLICABLE)

- DWYER EDISON HALSEY HAMILTON JEFFERSON EHS/UPPER

TELEPHONE NUMBER _____

EMAIL ADDRESS _____

PLEASE CHECK IF YOU WOULD LIKE UNOFFICIAL TRANSCRIPT EMAILED ___ YES ___ NO

SCHOOL/EMPLOYER THE TRANSCRIPT IS TO BE MAILED TO:
(OFFICIAL TRANSCRIPTS ARE NOT GIVEN TO STUDENTS/GRADUATES) –

THERE IS A THREE TO FIVE DAY PROCESSING PERIOD FOR TRANSCRIPTS TO BE COMPLETED.