

**Cape May County Technical School District
188 Crest Haven Road
Cape May Court House, NJ 08210
(609)380-0200, ext. 681**

Adult/Post Secondary
Transcript/Record Request Form

Please complete the following items in order to release your transcript/records:

Name: _____
(include previous name when enrolled, if applicable)

Address _____

Phone# _____ Social Security Number# _____

Date of Birth _____

Graduation Date _____

Program that you graduated from _____

Where you would like your transcript to be mailed:

Name _____

Address _____

Your Signature (required)

Return to:

Cape May County Technical School District
Attn: Adult Education Office
188 Crest Haven Road
Cape May Court House, NJ 08210
Fax: 609-465-4962

p:\student\request

OFFICE USE ONLY:

Date received _____ Date processed _____ Staff initials _____