

Great Oaks Career Campuses
Adult Workforce Development
303 Scarlet Oaks Dr.
Cincinnati, OH 45241

Transcript Request Form

Please Note: Transcript will not be released if the student has any outstanding financial obligation to Great Oaks Career Campuses.

******We can only research records from the year 2000 to Present ******

Cost is **\$10.00** per course transcript (cash, check, credit card or money order)

Please allow minimum of 5-10 business days for processing

Please print legibly

Today's Date: _____ S.S.N. _____

Last **First** **Middle**

Street **Current Phone Number**

City **State** **Zip Code**

Name while attending **Graduation Year**

Name of Program

Location Attended:

- Scarlet Oaks Diamond Oaks Live Oaks Laurel Oaks
 Health Professions Academy Public Safety Services

In accordance with Federal Law, records cannot be released without written consent of student.

Check All that Apply:

_____ **Total number of Transcripts (\$10.00 per course transcript)**

_____ **Pick Up**

_____ **Fax** Fax Number: _____

_____ **Mail**

Mail to address:

Student's Signature **Date**