BRENTWOOD

UNION FREE SCHOOL DISTRICT

RECORDS DEPARTMENT

Jerry Cheng
Records Management Officer

Sonderling Center
Brentwood High School
2 Sixth Avenue
Brentwood, NY 11717

Office Hours: 8:30AM - 2:30PM
Phone: (631) 434-2329
Fax: (631) 972-1405
Email: records@bufsd.org

==========

HOW TO OBTAIN YOUR HIGH SCHOOL TRANSCRIPT AND IMMUNIZATION RECORDS

How can I obtain my High School Transcript?

- Complete the online request form at www.bufsd.org/records.
- You can fax us your request to 631-972-1405.
- You can mail us a request. Just complete the attached form. Please fill in all the information requested and mail it in a business size envelope. Send to the following address:

  Brentwood High School
  Attn: Records Department
  2 Sixth Avenue
  Brentwood, NY 11717

How long will it take?

- Please allow up to five (5) working days to process your request.

What is the difference between an "Official Transcript" and a "Student Copy"?

- Colleges require an "Official Transcript", which is signed, sealed and dated.
- We can send this directly to you and/or directly to the college.
  - If we send this to you, you will receive a brown envelope, which you can open. Inside there will be a sealed white envelope marked, "Official Transcript". Do not open this envelope. Give this to the college. There will be student copies in the brown envelope for you.
- An emailed version ca also be sent directly to the college if email address is provided.

Is there a fee for this service?

- There is no fee for a simple transcript request (limit-5). However, there is a fee for extensive copying of student records, in accordance with District Policy.

Can I obtain a copy of my High School Diploma?

- No, we do not have copies of diplomas. However, after we verify that you have graduated, we can issue a letter stating that you have met the requirements and are a Brentwood High School Graduate.

BRENTWOOD

UNION FREE SCHOOL DISTRICT

Records Department
Sonderling Center - Brentwood High School
2 Sixth Avenue
Brentwood, NY 11717

Office Hours: 8:30AM - 2:30PM
Phone: (631) 434-2329
Fax: (631) 972-1405
Email: records@bufsd.org

REQUEST FOR STUDENT TRANSCRIPTS

(Please print and sign where indicated)

Student's Name _____
Last (as it appears on school records) First Initial

Current Full Name _____

Complete Address _____

_____

Email Address _____

Year Graduated from B.H.S. _____ or Year Withdrawn from School _____

Date of Birth _____ Daytime Phone _____

Check appropriate box(es):

☐ Transcript (Official Copy) ☐ Transcript (Student Copy) ☐ Immunization

ENTER NAME OF SCHOOL YOU WISH TO ATTEND WITH CONTACT INFORMATION

Name of School _____

Fax Number _____

Email Address _____

Address _____

Check any of the following:

☐ Email ☐ Mail ☐ Fax

- **COPY OF PICTURE ID MUST ACCOMPANY REQUEST**
- **TRANSCRIPTS WILL NOT BE RELEASED TO ANYONE OTHER THAN THE STUDENT, UNLESS APPROPRIATELY REQUESTED IN WRITING BY THE STUDENT**

Signature _____ Date of Request _____

*** Records may take up to 5 business days to process ***