NEW JERSEY DEPARTMENT OF EDUCATION
NEW JERSEY DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT
STUDENT RECORD REQUEST FORM

Note: The Family Educational Rights and Privacy Act: 20 USC 1232 (FERPA) requires written permission from students to have their school records and transcripts distributed.

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The New Jersey Administrative Code 12:41 et seq. which regulates NJ Private Vocational Schools, does not require that the NJ Department of Education or NJ Department of Labor and Workforce Development (LWD) maintain student records. Upon receipt of this signed and notarized document, a search of available records will be conducted on your behalf. Records provided by LWD will be unofficial.

Directions: A request for a copy of a student transcript and/or records can only be made by the former student. Please provide the requested information. Sign this document where requested and have your signature notarized. Return this form to the name and address listed below.

Name: ____________________________ SS #: ______________________

Name of School Attended: ____

Location of School Attended:____

Dates of Attendance: ____

Program of Study: ____

Current Address: ____

Current Phone Number & Email Address:_______________________________

Name at Time of Enrollment (if different from above) ______________________

Please forward my records to:____

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I ____________________________, hereby certify that the information above is correct
Print Your Name

to the best of my knowledge, and I certify that I am the former student requesting my own records.

________________________ ________________________
Student's Signature Notary Signature

________________________ ________________________
Date of Signature Date of Signature

Return to:
New Jersey Department of Labor and Workforce Development
Division of One-Stop Coordination and Support
School Approval Unit
P.O. Box 055
Trenton, NJ 08625-0055
Email: schoolapprovalunit@dol.state.nj.us