## NORTH FLORIDA

BAPTIST COLLEGE

## TRANSCRIPT REQUEST FORM

The following student has applied for admission to North Florida Baptist College and is requesting release and disclosure of personally identifiable information from personal education records to the Admissions Office of North Florida Baptist College.

## STUDENT INFORMATION

NAME:		_ DATE OF BIRTH://
NAME AT TIME OF ENROLLMENT:		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:()	EMAIL:	
SOCIAL SECURITY NUMBER:	<b>-</b>	_
SCHOOL INFORMATION		
SCHOOL NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
LAST ATTENDED DATE (Select one):		
□ GRADUATION DATE://		
• WITHDRAWAL DATE://		
□ DISMISSAL DATE://		

The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student education records. Under FERPA, the disclosure of personally identifiable information from a student's education records is prohibited unless written consent is given by the student or parent/legal guardian if the student is under 18 years of age. I am authorizing the release of personally identifiable information to North Florida Baptist College to be used in conjunction with a submitted application for review and potential acceptance to North Florida Baptist College.

## SIGNATURE:

DATE:

NOTICE TO SCHOOL REGISTRAR: Please mail the above student's official transcript and any standardized test scores to:

Admissions Office North Florida Baptist College 12046 Normandy Boulevard Jacksonville, Florida 32221