



431 Minor Street
Bristol, CT 06010
Phone: 860.584.8433
Fax: 860.584.0795
bristol.cttech.org

TRANSCRIPT REQUEST

*** This form should only be used by students who attend or have attended any of Bristol TEC's full-time day programs, **NOT** the part-time evening apprenticeship program.

*** We will post mail / email your transcript to the exact address that you provide. PLEASE NOTE: "OFFICIAL" transcripts are directly post mailed to schools, institutions, and/or employers. Normal processing time is 5 business days from the date the request is received. Personal copies are, "UNOFFICIAL").

LAST NAME: _____ FIRST NAME: _____

DOB: ____/____/____ PHONE NUMBER: _____

Email address: _____

LAST YEAR ATTENDED/YEAR CERTIFICATE AWARDED _____ TRADE/SHOP _____

I authorize the Bristol Technical Education Center to release the specified record(s) to:

(Please check one of the options indicated)

UNOFFICIAL TRANSCRIPT ☐

OFFICIAL TRANSCRIPT ☐

ADDRESS 1:

ADDRESS 2:

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

CITY & ZIP CODE: _____

CITY & ZIP CODE: _____

Signature of Student: _____

Date: _____

Signature of Parent/ Guardian: _____
(only if not at least 18 years of age)

Date: _____

Return this form to Bristol Technical Education Center via:

Fax: (860) 584-0795

Email: Miranda.Hoxha@cttech.org

Mail: Bristol Technical Education Center, 431 Minor Street, Bristol, CT 06010