



# Bradford-Union Technical Center

## Students Services Office of Registrar

### Transcript Request Procedures

#### **FORMER STUDENTS**

For a \$10.00 per copy fee you may order your BUTC official transcript through the Registrar in Student Services at 904-966-6769. You may pay over the phone by calling 904-966-6768 or in person in the Cashier's Office in Building 1. You must also complete a transcript request form that you can download from [www.butc.edu](http://www.butc.edu), and then submit it to the Registrar in Student Services.

#### **CURRENT STUDENTS**

Complete and submit a Transcript Request Form to the Registrar in Student Services.

#### **IN PERSON REQUEST**

You may visit our office in person at BUTC in Building 9 in Student Services and request a transcript in person. You will need to complete a Transcript Request Form and pay the Cashier in Building 1.

#### **MAIL REQUEST**

To order your transcript by mail, send your \$10.00 per copy payment by money order and your BUTC Transcript Request Form to:

Bradford-Union Technical Center  
Atten: Student Services, Registrar  
609 North Orange Street  
Starke, FL 32091

#### **OUTSTANDING BALANCE**

Transcripts will not be issued for students who have an outstanding balance.

#### **STATUS OF TRANSCRIPT REQUEST**

It will take up to **(2-3)** business days to process your request. A transcript request will not be processed until you pay the Cashier.



# Bradford-Union Technical Center

## TRANSCRIPT REQUEST FORM

*(Please check all that apply)*

- Transcript is to be picked up \_\_\_\_\_
- Faxed (**Unofficial Only**) Fax Number: (\_\_\_\_\_) \_\_\_\_\_
- Picked up by designated person (\*\*see below) \_\_\_\_\_
- Send via US Mail (*please indicate mailing address below*) \_\_\_\_\_

### Name and address of where transcript is to be mailed:

Person, School, or Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Student's Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Middle Initial: \_\_\_\_\_ Last name used as a student: \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Dates of Attendance at BUTC: \_\_\_\_\_

Program of Study: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*Name of designated person to pick up transcript: (**Identification is required**):

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**PLEASE NOTE: Transcripts take up to 2-3 business days to process.**

**Mail to: Bradford-Union Technical Center  
Attn: Student Services  
609 N. Orange Street  
Starke, FL 32091**

**Fax to: Student Services  
904-966-6817**