

RECORDS REQUEST FORM

What type of documentation do you need?

- Official Transcript
- Unofficial Transcript
- Letter of Graduation
- Proof of attendance at Providence Schools

Other: _____

(we do not handle any private/charter institutions, alternative programs-GED)

Name (Maiden) _____ Date of Birth: _____

Address: _____

Phone Number: _____

Email Address: _____

Name of School Attended: _____

Year of Graduation: _____ Last year attended if you did not graduate: _____

Please provide a mailing address or email address to where you like your records sent to:

Signature: _____ Date: _____

***The Central Records Office operates from 8:30am – 4:00pm Monday through Friday. We are closed on weekends and holidays. Please allow 10 days for your request to be completed. Send a check or money order of \$5.00 fee per transaction on official transcripts to CRO/Providence Schools 379 Washington St. Providence RI 02903. Record retention (5) years after student leave program*or (5) years after student reaches the age of (18) whichever is longer. To make a request please send via email CRO@ppsd.org or via fax. 401-278-2878.**