



KENTUCKY COMMISSION ON PROPRIETARY EDUCATION

300 Sower Boulevard, Frankfort, Kentucky 40601
Phone (502) 564-4185 <http://kcpe.ky.gov>

REQUEST FOR TRANSCRIPT

INSTRUCTIONS

1. This request shall be typed or printed legibly and completed in its entirety.
2. Please submit this request with a five dollar application fee in accordance with 791 KAR 1:025. This fee is nonrefundable. All fees must be paid by check or money order made payable to the Kentucky State Treasurer. **DO NOT SEND CASH**
3. This completed request may be submitted to the Kentucky Commission on Proprietary Education by mail to 300 Sower Boulevard, Frankfort, Kentucky 40601.

STUDENT INFORMATION

Student Name			Date
Student Name During Attendance At School		Social Security Number	
Street Address	City	State	Zip Code
Home Telephone Number	Cell Phone Number	Email Address	
Dates Attended		Program Name	

SCHOOL INFORMATION

School Name			
Street Address	City	State	Zip Code

Please mail transcript to the address listed below:
(Please leave blank if transcript is being mailed to the address listed at the top of the page).

Name (Attention)			
Address	City	State	Zip Code

REQUEST

I hereby request a copy of my transcript relating to my attendance at the above named school. I understand that since the school has closed, the Commission may not have a transcript available. If a transcript is available, it will be mailed to me at the address indicated above in approximately two weeks. If a transcript is not available, I will be notified at the address indicated above in approximately two week that the transcript is not available.

Student Signature	Date
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