Transcript Request Form

There is a charge of $5.00 per Official Copy of a transcript. There is no charge for the Unofficial Copy. Please allow on week for processing.

Student Information – Please Print

Name _____ Former Name _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Birthdate _____ Program or Class _____ Last year attended _____

Email _____

Request #1

- ☐ **Sealed Official Transcript Copy** ☐ **Mail/Email Transcript To or** ☐ **Pick Up (date)** _____
- ☐ **Hold/Current Semester's Grades** **School/Organization** _____
- ☐ **Hold until Certificate is recorded** _____
- ☐ **Unofficial Transcript** **Address** _____

City _____ **State** _____ **Zip** _____

Email _____

Request #2

- ☐ **Sealed Official Transcript Copy** ☐ **Mail/Email Transcript To or** ☐ **Pick Up (date)** _____
- ☐ **Hold/Current Semester's Grades** **School/Organization** _____
- ☐ **Hold until Certificate is recorded** _____
- ☐ **Unofficial Transcript** **Address** _____

City _____ **State** _____ **Zip** _____

Email _____

Transcripts will not be provided for students with financial obligations to Pickens Technical College or any community college.

Pursuant to provisions of the Family Educational Rights and Privacy Act of 1974 (Public Law 93-380, I grant permission for the release of my academic record as indicated.)

If paying by debit/credit card over the phone, signature on this form is authorization for use of such card. Please call the cashier at 303-326-2120 and provide over the phone: student name, credit card number, amount of payment, credit card billing zip code, name on credit card.

Signature_____Date_____

Direct Inquiries To: Transcripts/Attn: Registration Office
Pickens Technical College
500 Airport Blvd.
Aurora, Co. 80011
Phone: 303-326-2071
Email: pickensregistration@aurorak12.org

PICKENS
TECHNICAL COLLEGE
Education That Works.

Office Use Only

Copies Requested_____Amount Paid_____Initial_____

Updated 10/7/2025