



# Darlington County School District

B. A. Gary Educational Complex  
100 Magnolia Street, Darlington SC 29532  
Phone: (843) 398-2856 FAX: (843) 395-8944

## Transcript/Record Search Request Form

Directions: Please provide us with **three business days'** notice in order to complete your transcript request. **Form MUST be completed in its entirety in order to be processed.**

Return the completed form, along with a **non-refundable \$5.00** administrative fee, to:  
**Office of Adult Education, 100 Magnolia Street, Darlington, SC 29532**

### Type of record requested:

- High School Transcript
- Work Keys Scores
- GED Scores (Unofficial) For official scores or duplicate GED go to website [www.ed.sc.gov](http://www.ed.sc.gov)
- Other: \_\_\_\_\_
- CNA Certificate: Instructor: \_\_\_\_\_
- Chemistry Grade: Instructor: \_\_\_\_\_

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Last First Middle/Maiden*

Name used when in *Adult Education*: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_ Soc. Sec. No.: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Last *Adult Education Center* Attended in Darlington County: \_\_\_\_\_

Last **Year** Attended Adult Ed: \_\_\_\_\_ Year Earned High School Diploma: \_\_\_\_\_

Name of High School on Your Diploma: \_\_\_\_\_

Received GED: Year \_\_\_\_\_ Did Not Receive a High School Diploma or GED: \_\_\_\_\_

**Please send transcript to address below: OR Call me to pick up: check**

School or Name of Individual: \_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_

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

***I authorize the Office of Adult Education to release my transcript based upon the information provided above.***

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*