



# Student Records Request

**RETURN COMPLETED FORM TO:**  
**Baldy View Regional Occupational Program**  
**Attention: Student Records**  
 Career Training Center  
 1501 S. Bon View Avenue  
 Ontario, CA 91761  
 Phone: (909) 947-3400  
 Fax: (909) 947-4411

## 1. Document Type

	Document Type	Expiration Term	Cost
<input type="checkbox"/>	Course Completion Certificate Reprint	Two (2) years from date of issuance	\$10
<input type="checkbox"/>	C.P.R. Card Reprint	Two (2) years from date of issuance	\$10
<input type="checkbox"/>	Unofficial (Not Sealed) Adult Transcript**	Five (5) years from date of issuance	NONE
<input type="checkbox"/>	Official (Sealed) Adult Transcript**	Five (5) years from date of issuance	\$10
<input type="checkbox"/>	Coronal Polishing Certificate Reprint	Five (5) years from date of issuance	\$10
<input type="checkbox"/>	Radiology Certificate Reprint	Five (5) years from date of issuance	\$10
<input type="checkbox"/>	Infection Control Certificate Reprint	Five (5) years from date of issuance	\$10
<input type="checkbox"/>	Pit and Fissure Certificate Reprint	Five (5) years from date of issuance	\$10
<input type="checkbox"/>	Dental Sealants Certificate Reprint	Five (5) years from date of issuance	\$10

## 2. Student Information

Student Name (at the time of course completion)		Date of Birth	
Current Mailing Address		City, State, Zip Code	
Phone Number		Email Address	

## 3. Course Information

Course Title	Instructor Name	Dates of Attendance
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## 4. Send My Record to a Third Party (if applicable)

Institution/Agency Name	Address
Attention/Department	City, State, Zip Code

## 5. Consent to Release

**In accordance with the Family Education Rights and Privacy Act (FERPA) I hereby authorize Baldy View R.O.P. to release my educational records:**

**Sign:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## 6. Delivery & Payment

<input type="checkbox"/> I plan to pick up my record and pay at that time <input type="checkbox"/> Mail my record (I will send a money order once I am contacted)	<i>OFFICE USE ONLY</i>	
	<i>DATE</i>	<i>STAFF INITIALS</i>
	<i>RECEIVED:</i>	
	<i>PROCESSED:</i>	
	<i>PAID:</i>	



ALLOW 5-7 BUSINESS DAYS TO PROCESS, \*\*HIGH SCHOOL STUDENTS NEEDING TRANSCRIPTS WILL NEED TO CONTACT THEIR HIGH SCHOOL. REQUESTOR WILL BE NOTIFIED WHEN READY. PAYMENT MUST BE MADE AT TIME OF PICK UP- NO CASH OR CHECKS ACCEPTED, MONEY ORDERS PAYABLE TO BALDY VIEW R.O.P. NO CREDIT CARD PAYMENTS PROCESSED VIA TELEPHONE. EXPIRED DOCUMENTS WILL NOT BE REPRINTED.