

Cumberland County High School
912 North Main Street
Burkesville, Kentucky 42717
Phone 270-864-3451
Fax 270-864-1284



TRANSCRIPT REQUEST

Last Name (As Enrolled) _____

First Name _____ Middle Initial _____

Year of Graduation _____ Date of Birth _____

Release of Records

I hereby authorize Cumberland County High School to release a copy of my high school transcript to:

Name _____

Address _____

City _____ State _____ Zip Code _____

Signature _____ SS# _____

Date _____ Number of Copies _____

*There is a **\$3.00** charge per request. Payment must be received before transcript(s) will be released.*