

**CAMPBELL COUNTY BOARD OF EDUCATION
MATERIALS CENTER**

Physical Address
316 Liberty Street
JACKSBORO, TN 37757
PHONE: (423) 562-1655
FAX: (423) 562-9605

Mailing Address
172 Valley St
JACKSBORO, TN 37757

TRANSCRIPT REQUEST

Person Requesting Transcript:

First Name: _____ **Middle Name:** _____

Maiden Name: _____ **Last Name:** _____

Graduated From: _____ **Jacksboro High** _____ **Other:** _____
(Name of School)

_____ **LaFollette High**

_____ **CCHS**

_____ **Jellico High**

_____ **Stony Fork**

Last Four Digits Social Security# _____ **Date of Birth:** _____

Year Graduated: _____ **Non-Graduate:** _____
(List the last year attended)

Home Telephone#: _____ **Work#:** _____

Cell Phone#: _____

MAIL TRANSCRIPT TO:

DATE: _____ **SIGNATURE:** _____
(Name at present time)

Email form to: becky.hatmaker@ccpstn.net or
mary.heatherly@ccpstn.net or
rita.goins@ccpstn.net