Transcript and Diploma Request Form

St. Clair County Regional Office of Education 1000 S. Illinois St. Belleville, IL 62220 Phone: 618-825-3900

Fax: 618-825-3999

In order to process your request, complete this form and return it with proper payment and a copy of your driver's license or state ID (\$10 for each transcript and \$10 for each diploma). Payment can be made in office with cash or card, or online by clicking "Book an Appointment", selecting "GED" and then "GED transcripts". Email the completed request form along with a copy of your driver's license or state ID to GED@sccroe50.org. We are not responsible for lost or undeliverable mail. Please allow two weeks for processing. Fees are non-refundable.

Check the box(es) for each item	n(s) that you are requesting.	
Transcript (\$10 per cop	y): Diploma (\$10	per copy):
PLEASE PRINT Current name:		
Name at the time of testing:		
Date of Birth://	Phone Number:	
Current Address:		
Email:		
Signature:	Date: _	
	mplete this section ONLY if this transcript	
Name of College/Employer:		
Address:		
City, State, and Zip:		
	OR	
Name of College/Employer		
FAX Number:		
TIM I vuilloot.		
Initials of ROE Staff:	Date Completed:	Payment Type:
	Mailed Faxed Picked Up	Cash Card(in office) Online