

## **Request for Transcript**

Submit completed Request for Transcript with \$10.00 fee to the Registration Office in Building 8 at Lively Technical Center, 500 North Appleyard Drive, Tallahassee, FL 32304, 850-487-7414. A photo ID is required.

Registration is open Monday - Friday, 8:00 a.m. until 4:00 p.m. Processing may take up to two (2) weeks.

PLEASE PRINT							
Last Name:		First Name	:			MI:	
Name if different while attending Lively Technical Center							
Last Name:		First Name				MI:	
Social Security #:			Date of Birth:				
Mailing Address:		City:			State:	Zip:	
Home Phone Number:	Work Phone		Number: Cel		I Phone Number		
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Date of Attendance:			(	Completed: [	☐ Yes ☐ No		
Program:						☐ Day ☐ Evening	
Signature:					Date:		
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□ Mail to:							
□ Pick Up							
OFFICE USE ONLY	Cor	npleted	 I By:		Date:		