



THE NYC DEPARTMENT OF EDUCATION
Williamsburg High School for Architecture and Design
Gill Cornell, Principal
257 North Sixth Street, Brooklyn, New York 11211
Phone: (718) 388-1260 ◦ Fax: (718) 486-2580

Records Request Instructions:

Please follow the instructions below to request records such as transcripts, and letters for proof of graduation and proof of attendance.

Requests must be filled out on the “Student Records Request Form”. You can access this form on our school’s homepage at www.whsad.org under the link called “Transcript & Records Request” on the right sidebar of the website. You may also pick up a hard copy of this form from our main office, located in Room 230. Please fill this form out completely. Any missing information will delay the processing of your request.

A legible proof of ID must also be submitted with the form. Requests with missing or illegible proof of ID will not be processed.

You may drop off the completed form and copy of ID in person at our main office, located in Room 230. Or you may fax the completed form and copy of ID to 718-486-2580. Be sure to write the words “records request” on all pages of your submission.

Allow two weeks for the request to be processed.

These instructions can also be found online; please visit our webpage to access both the form and instructions. Thank you.



STUDENT RECORDS REQUEST FORM UPDATED NOVEMBER 5, 2012

Please use blue or black ink only. Valid proof of identification will be required.¹ Please allow up to five (5) business days for processing.

Section 1: Biographical Information			
First Name	Middle Name	Last Name	Maiden Name
Date of Birth		NYCDOE Student ID (9-digit)	
Telephone Number	Email Address		

Section 2: High School Information	
Name of Last NYC High School Attended	Are you a HS graduate from a NYC public school? Circle one. YES NO
School Address	Is this school still open? Circle one. YES NO
Years of attendance	TYPE OF RECORD(S) REQUESTED (check all that apply): <input type="checkbox"/> Transcript <input type="checkbox"/> Confirmation of Diploma <input type="checkbox"/> Proof of Graduation <input type="checkbox"/> Letter of Attendance
Year of graduation	

Section 3: Mailing Information		Address #1
<input type="checkbox"/> Check only if this is your mailing address	Full Name of Individual and/ or Organization	
Mailing Address (House Number, Street Name)	Apt or Suite Number	
City	State	Zip Code

		Address #2
<input type="checkbox"/> Check only if this is your mailing address	Full Name of Individual and/ or Organization	
Mailing Address (House Number, Street Name)	Apt or Suite Number	
City	State	Zip Code

Section 4: Signature	
<i>This form must be signed by an individual 18 years of age or older. If student is under 18 years of age, this form must be signed by the student's parent or legal guardian¹</i>	
Signature	Date

¹ A family member, parent, or guardian submitting this form on a student's behalf must provide proof of relationship with the student and include a valid proof of identification with submission.