



THE
COLLEGE
OF THE
FLORIDA KEYS

TRANSCRIPT REQUEST FORM FOR FLORIDA PUBLIC COLLEGES AND UNIVERSITIES

Please type or print legibly and complete all sections in full.
You will need to submit a separate request for each additional recipient.

Student Information:

Student ID or last four digits of Social Security Number: _____ Date of Birth: _____

Name: _____
Last First Middle (Previous Name)

Address: _____
Street City State Zip Code

Current email: _____ Phone: (_____) _____

Institutional Information: Some State of Florida public colleges and universities allow us to submit transcripts at no charge via the statewide FASTER (Florida Automated System for Transferring Educational Records) system. FASTER is an electronic mail system that provides school districts, community colleges, and universities with the means to exchange transcripts and other student records electronically.

Note: No official transcripts will be furnished until your financial obligations to the college have been satisfied. The college is not responsible for transcripts once they leave our office. Please print legibly; failure to do so may result in a lengthy delay or incomplete transcripts.

Name of institution: _____

Release authorization: Once received transcripts are generally processed between 5 and 10 business days.

Student's Signature: _____ Date: _____
(written or electronic digital signature is mandatory for release of transcripts – **typed name is not acceptable**)

Return form to the Office of Enrollment Services
The College of the Florida Keys
5901 College Rd
Key West, FL 33040
Fax: 305-292-5163
Email: transcripts@cfk.edu

For Enrollment Services Office Use Only:

Date Received: _____ Date Entered in SZAFast: _____ Initials: _____