

Union-Endicott Central School District Office
1100 East Main Street
Endicott, NY 13760
ATTN: Mary Mullock, Records Management Officer
FAX: 607-757-2695 uek12.org

Union Endicott School Records Request

Student Name: _____ **Date of Birth:** _____
Print Name- include *Maiden* name, if applicable

Graduate? _____ **Year:** _____ **Last U.E. School attended:** _____

Phone number: _(____)_____

Requested by:

____ Student ____ Other Name-if *Not* the student: _____

Relationship: _____

Records Action: *Please include phone number below*

____ Pickup Phone number for pick up: _(____)_____

____ FAX Fax business Name: _____ Fax#: (____)_____

____ Mail **Note: \$1.25 mail fee for each location address indicated below:**

Business Agency/College Name

Address/P O Box

City State zip

Specific records requested: _____

Signed: _____ **Date:** _____

Transcripts

Limit 2 copies free. Each additional copy is \$1.25.
When mailed, transcript fee is \$1.25 per mailing
address/location and payable at the time of request to
receptionist. Please allow 72 hours to process.

Records

Records processing fee is .25 cents per page and is
Payable to receptionist at time of request. Please
Allow 72 hours processing time