



**SPRING BRANCH INDEPENDENT SCHOOL DISTRICT**  
**Human Resources Department**

**Service Record Request**

**Date:** \_\_\_\_\_ **Resign Date:** \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Social Security :** \_\_\_\_\_  
**Maiden Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_

*There are two types of service records we can generate, depending on the purpose and need. Please indicate below which pertains to you.*

- Unofficial**     *Purpose: Certification programs, universities, etc.*  
 **Official**        *Purpose: Moving to new District*

**Indicate which of the following information you will need.**

- Service Records                       Transcripts                       Certificates
- 

- I will pick up the records when ready.**  
 **I would like to have the above indicated information mailed to:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

- I would like to have my information faxed to (for unofficial copies):**

\_\_\_\_\_  
University

\_\_\_\_\_  
Attn:

\_\_\_\_\_  
Fax #

*Service Records Requests may be mailed, interoffice mailed, or faxed to: **Human Resources Attn: Records Dept.** Fax number: 713-251-2343. If you requested to pick up the record, we will contact you at the number provided once the record is ready.*

**Signature:** \_\_\_\_\_