



TRANSCRIPT REQUEST

Student's name _____

Current address _____

SSN ____ - ____ - ____ CC student ID # _____

Phone number () _____ E-mail address _____

Student status Graduate Year of graduation _____

Withdrawn Last semester/year attended _____

Actively enrolled

Official transcript (addressed to an institution, etc.)\$10
Please note: Any type of special handling will require an additional fee that must be paid in advance

Unofficial transcript (personal copy)No charge

Check all items that apply:

- Hold transcript for final semester grades
- Hold transcript until my degree is posted
- Hold transcript for grade change
- I will pick up transcript
- Mail transcript to the address provided
- Fax unofficial copy to the number provided

Purpose for transcript:

- Transfer
- Employment
- Military service / VA benefits
- Scholarship
- Graduate studies
- Teacher certification
- Other _____

Please make note of the following: A separate transcript request must be completed for each transcript to be mailed or delivered to a different recipient.

Payment of the transcript fee may be made in cash, by check, or by debit/credit card. Debit /credit card payments must be made through the finance office. No transcript be issued until a student's financial obligations to the College are fully current and the transcript fee has been paid. After 30 days, transcript requests will expire and must be re-submitted.

The usual processing time for a transcript request is one week. At the beginning or end of a semester, please allow at least two weeks for processing.

Name and address of recipient of transcript (institution, employer or agency):

Name of individual/institution _____

Address _____

City _____ State _____ Zip _____

Fax number (if applicable) () _____

Authorization to release transcript:

Student's signature

Date

FOR OFFICE USE:

Rec'd: ____ / ____ / ____

By: _____

Finance OK _____

Sent: ____ / ____ / ____

By: _____