

OR

**Mail To / Email To / Fax To:**

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| ATTN: Jane PerryRichmond Community CollegePO Box 1189, Hamlet NC 28345Telephone: 910-410-1779 Fax: 910-582-7102bjperry@richmondcc.edu | ATTN: Tara McDuffieRichmond Community College600 McLean St, Laurinburg NC 28352Telephone: 910-410-1769 Fax: 910-610-1518tdmcduffie@richmondcc.edu |

 *Serving Richmond and Scotland Counties*

**ADULT HIGH SCHOOL REQUEST FOR TRANSCRIPT**

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| **FOR OFFICIAL USE ONLY: Transcript issued (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Please complete a separate request form for each transcript copy that you want.**

**NO TRANSCRIPT WILL BE ISSUED UNTIL ALL FINANCIAL OBLIGATIONS TO THE COLLEGE HAVE BEEN SATISFIED.**

**COLLEGE & CAREER READINESS (BASIC SKILLS) OFFICE REQUIRES A 24-HOUR NOTICE OF A TRANSCRIPT REQUEST.**

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| **Student Information (Please Print Legibly)** |
| **Full Name (First, Middle, Last):** | **Name Used During Testing (Maiden Name, etc.):** |
| **Current Mailing Address, City, State and Zip Code:** |
| **Phone Number:** | **Date of Birth:** | **Last 4 digits of SS #:** |
| **Personal Fax #:** | **Date Completed High School Diploma Program:** |
| **Personal Email Address:** |

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| **Type of Transcript Needed (Please Check All That Apply)****1. Official Transcript (signed with college seal) \_\_\_\_\_\_\_\_\_\_ 2. Student Copy (unofficial transcript) \_\_\_\_\_\_\_\_\_\_** |
| **How To Send Transcript (check one):** **Pick Up In Person from Honeycutt Center, Laurinburg Campus. \_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Pick Up In Person from Lee Building, Hamlet Campus.** \_\_\_\_\_\_\_\_\_\_\_\_\_\_**Mail to address below. \_\_\_\_\_\_\_\_\_\_\_\_**  |
|  **Mail Transcript To:****College or Recipient’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(City, State, Zip) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Signature Authorizes Release of Official, Unofficial Adult High School Transcript****Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |