



Continuing Education Request for Transcript

Please complete a separate request form for each transcript copy that you need.
Transcripts require one business day to be processed.

Mail completed form to:
Richmond Community College Transcript Request, PO Box 1189, Hamlet, NC 28345
or

Email completed form to: ceregistrar@richmondcc.edu
For any questions, call (910) 410-1703 or (910) 410-1700

Name _____ Former/Maiden _____

SSN/Student ID# _____ Date of Birth _____

Phone Number _____ Email _____

Last term of enrollment (include current term): _____

DO YOU WANT: To pick up transcript The College to mail the transcript to:

Name

Address

City

State

Zip
Code

Country

Signature: _____

Date

FOR OFFICIAL USE: Transcript issued (date) _____ By: _____