



TRANSCRIPT REQUEST FORM

Transcripts are only processed upon the written request of the student.

All financial obligations to the college **MUST** be satisfied before transcripts will be issued.

- This form cannot be accepted by email.
- Sending by Mail? Mail the completed and signed request to the address below. Include \$5.00 for each transcript requested. Checks and money orders are accepted. **DO NOT** send Cash!
- Sending by Fax? Fax the completed, signed request to one of the fax numbers below. Call the Business Office at 704-272-5355, or 704-290-5849 to pay for each transcript requested.

Name _____
(LAST) (FIRST) (MIDDLE/MAIDEN)

SSN/ID _____ Daytime Phone () _____

Current Address _____ City, State, Zip _____

Email Address _____ Date of Birth _____

Student Signature _____ Date _____

Do you want: ___ Curriculum (All classes) ___ AHS (Adult High School) ___ Unofficial High School

Do you want: ___ Transcript Emailed ****Only if receiving college is part of Electronic Transcript Exchange**

___ To pick up transcript *If not picked up within 24 hours, the transcript will be mailed

___ Transcript mailed

Print (# of copies): ___ Transcript now ___ Hold until grades are posted
___ Hold until graduation information is posted

Attention

Attention

School / Work Name

School / Work Name

Address

Address

City State Zip

City State Zip

-----OFFICE USE ONLY-----

Paid _____ Date Sent _____ By _____

Submit completed form to the Registrar:
South Piedmont Community College
PO Box 126, Polkton NC 28135 | PO Box 5041, Monroe NC 28111
FAX: 704.272.5303 | 704.993.2425