

Guilford Technical Community College

Enrollment Services - Processing
P.O. Box 309
Jamestown, North Carolina 27282
Tel: (336) 334-4822 or (336) 454-1126



Transcript Request Form

An Affirmative Action/Equal Opportunity College

No faxed requests (For transcript request information see www.gtcc.edu/Students/Forms/Transcript Requests.)

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), a student's record(s) will not be released without prior written consent from the student*. Students must also fulfill ALL financial obligations to GTCC before transcripts are sent.

Student I.D. Number: _____ Date of Birth: _____

Legal Name: Last, First, MI Previous or Maiden Name

Permanent Address: Apt# / Street City State Zip Code

Contact Phone #: Home Work E-mail Address

Signature of Student * *Cannot process without signature.*

Date

Important! Must sign and date.

Please fill out completely. Check transcript type and/or Placement Test scores to be sent.

(Please note, we do not issue GED transcripts, you must contact the GED Office in Raleigh, NC at 919-807-7137 or 919-807-7138)

___ Adult High School Transcript ___ Placement Test Scores (no fee for Test Scores)

___ Transcript: Approximate dates of attendance From: _____ To: _____

Please mail: ___ Now ___ At the End of the Semester

There is a \$5.00 fee for each transcript requested.

Please note that payment may be cash, money order, and VISA or MasterCard (credit card information **not accepted through the mail or by phone**); no personal checks.

I hereby authorize GTCC to release _____ (# of copies) of my transcript to the following address(es).

Mail To: (1.) _____ (2.) _____

For Office Use Only

Transcript Fee Received ___ Fee Not Required ___ Validation # _____ Amount Pd. _____ PERC Checked _____

Request Completed By: _____ Date: _____

09/08