



UNOFFICIAL

Transcript Request Form

UNOFFICIAL TRANSCRIPTS do not bear the official seal of the college and are for a student's general use; they may be sent directly to the student.

Date: _____, 20____

CHECK THE CAMPUS YOU ATTENDED: Main _____ Carver _____ Southwest _____ Central _____

Please send _____ copy(ies) of my **UNOFFICIAL** transcript to the address listed below:

Name of Student _____

Address _____

City _____ State _____ Zip _____

PRINT your **FULL NAME** as listed on your records:

_____ Date of Birth _____ / _____ / _____

Student Number _____ or Social Security Number _____ - _____ - _____

Cell Phone () _____ - _____ Home Phone () _____ - _____

DO YOU HAVE COLLEGE CREDITS ON?

Computer Only (after 1985) _____ Microfilm and Computer (before and after 1985) _____ Microfilm Only (before 1985) _____

If before 1985, please indicate the year(s) you attended _____

Please list **ALL PREVIOUS** names _____; _____; _____;

YOUR SIGNATURE _____

NOTE: REGULATIONS GOVERNING TRANSCRIPTS OF RECORDS

1. Request will be honored in the order of receipt. However during peak periods such as registration, examinations, commencements, etc. there will be some delays. Transcripts should be requested in advance of these periods.
2. Microfilm transcripts may require several days of research.

It is the official policy of the Alabama Department of Postsecondary Education and Bishop State Community that no persons shall, on basis of race, color, disability, sex, religion, creed, national origin, or age be excluded from participation, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment.

OFFICE USE ONLY

Date Request Sent _____ If Denied, Reason _____ Office Personnel _____