

REQUEST FOR TRANSCRIPT

Continuing Education, Adult High School and GED

Students and former students needing copies of their Continuing Education must request them from the Continuing Education Office. The request must be submitted in written form and include the name and address of the institution or individual receiving the transcript. **The request must bear the original signature by the student.** Faxed requests will be honored only if the official transcript is forwarded directly to a college or university. Phone requests are not acceptable.

PLEASE PRINT

Name: _____

(Please include any possible different last names)

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Telephone #: _____

Social Security #: _____

Mail Transcript To: (must have complete and accurate address(s))

Student Signature: _____ Date: _____

Please specify the type of transcript requested: ____ Adult High School ____ Continuing Education ____ GED	Number Requested: ____ Official Copy (s) ____ Student Copy(s)
---	---

Transcripts are not processed at time of request; please allow 3 –5 business days for your transcript request to be processed.

Rowan-Cabarrus Community College

PO Box 1595, Salisbury NC 28145
704-637-0760, ext. 288