UNOFFICIAL TRANSCRIPT REQUEST FORM

Registrar's Office | Armstrong Hall, 14 E. Cache la Poudre Colorado Springs, CO 80903
PH: 719.389.6610 | Fax: 719.389.6931 | Web: www.coloradocollege.edu | Email: registrar@coloradocollege.edu

- Transcript orders **cannot** be held for a future grade or degree posting. Please ensure all final grades and marks are posted on your record (Banner/Stellic) prior to submitting your unofficial transcript request.
- **GW** marks indicate a "grade withheld" due to an incomplete/missing course evaluation. Completing the course evaluation in Banner will automatically release the withheld grade and show the actual grade assigned to the student. Please complete all course evaluations prior to submitting your unofficial transcript request.
- Requests **will not** be processed without the student's signature.

Student Information
(Please complete all contact information)

_____
Name

_____
Name while enrolled (if different from above)

_____
CC Student ID # (required for current students)

_____/_____/_____
Date of Birth

Telephone: _____

(Circle one): Home Work Cell

_____
Email

GPA information is not automatically included for students who attended prior to 1985. Please note under special instructions if requested.

Order Information
(Please complete applicable deliver information)

Number of Copies (for printed orders): _____

Pick up
Transcripts not picked up within **2 weeks** of request will be mailed to the current address on file.

Mail To:
Email _____
CC Box # _____
Home/Mailing Address (listed in Banner)
Other (please complete mailing details below)

_____
Recipient Name

_____
Address, Line 1

_____
Address, Line 2

_____/_____/_____
City State Zip code

_____
Country (if other than U.S.)

In compliance with the *Family Educational Rights and Privacy Act of 1974*, transcripts will not be released to a third party without the student's written consent. I also understand that transcript processing will not be held for future grade marks, degree postings, or withheld grades due to incomplete/missing course evaluations (GW). I hereby authorize the release of my transcript:

_____ / _____
Student Signature **Date**