



Office of the Registrar

TRANSCRIPT REQUEST FORM

*Official transcripts are **NOT** issued to students.
Unofficial copies may be requested for personal use.
There is a \$5.00 processing fee for each transcript requested.
Transcripts will not be released if there are any balances due or
property that must be returned to the College.*

SS#: _____ - _____ - _____

DATE OF REQUEST: ____/____/_____

NAME: _____
(LAST) (FIRST) (MAIDEN)

MAJOR: _____ PHONE NUMBER: (____) _____ - _____

CURRENT ADDRESS: _____

E-MAIL: _____

Are you presently enrolled at Johnson College? YES NO

If you responded no, please indicate year of graduation: 19____ 20____

TYPE OF TRANSCRIPT:

Official Unofficial

NUMBER OF COPIES @ \$5.00 EA. : _____

*If the transcript is being sent to
more than one place use more
form. Otherwise indicate
number of copies needed.*

PROCESS TRANSCRIPT:

Send Transcript Immediately

Hold for current semester grades

Transcript is to be picked up
(Unofficial transcripts only. ID is required)

SEND TRANSCRIPT TO THE FOLLOWING ADDRESS: **(PLEASE NOTE: TRANSCRIPTS WILL NOT BE FAXED)**

NAME OF OFFICE / ATTENTION

COLLEGE / BUSINESS

ADDRESS

CITY / STATE / ZIP

STUDENT SIGNATURE: _____

Office Use Only: Date Sent: _____ Amount Paid: _____ Sent By: _____