



**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: \_\_\_\_\_

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Office Use Only: Date Sent: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Sent By: \_\_\_\_\_