

Institute of Design and Construction

Request for Transcript

I hereby request a transcript of my grades to be sent to;

PLEASE ALLOW FIVE (5) DAYS FOR TRANSCRIPTS TO BE PROCESSED

All transcripts are \$5.00 each.

Number of transcripts requested _____ ; Amount enclosed \$ _____.

All transcripts issued to the student are UNOFFICIAL.

All transcripts issued to agencies and institutions are OFFICIAL.

Transcripts will NOT be released if there is an outstanding balance of tuition or fees or if you are in default of a federal student loan.

Name _____ Last 4 digits ss# _____

Address _____

City _____ State _____ Zip code _____

Telephone _____ E-Mail _____

Name and Address when attending IDC if different from above:

Name _____

Address _____

City _____ State _____ Zip code _____

Signature _____ Date _____

=====
Office Use Only

Date _____ Amount Paid _____ by _____

Date Sent _____ by _____