

# TRANSCRIPT REQUEST FORM

## MISSISSIPPI COLLEGE

Office of the Registrar

PO Box 4028

Clinton, MS 39058

FAX 601-925-3481

Please provide all information requested below to insure accurate document identification.

Date of Request \_\_\_\_\_

Student's Signature \_\_\_\_\_

Print all names under which your records might appear.

Are you currently enrolled at MC \_\_\_\_\_ or Last date attended \_\_\_\_\_

Birth Date \_\_\_\_\_ Email Address \_\_\_\_\_

Social Security No. \_\_\_\_\_ (if attended prior to August 2007)

MC ID No. 700 \_\_\_\_\_ (if attended after August 2007)

Send Transcript to:

(Please print plainly)

Student's Contact Phone Number: \_\_\_\_\_

Number of copies to this address \_\_\_\_\_

Hold for current semester grades \_\_\_\_\_

Hold until degree is posted \_\_\_\_\_

Send immediately \_\_\_\_\_

### Transcript Fees:

**Transcript only \$ 5.00 per copy**

**Transcript FAXED only \$10.00 per copy**

**Transcript FAXED and  
mailed \$15.00 per copy**

For Requests for FAXED transcripts:\*

Recipient's FAX Number \_\_\_\_\_

**\*It is your responsibility to assure that a FAXED copy of your transcript is acceptable with the Recipient.**

### NOTE

If your record has been encumbered by financial indebtedness to Mississippi College, no transcript can be issued until the obligation has been cleared. Transcripts from other colleges or universities which have been sent to this office for our files cannot be copied. Additional copies must be obtained directly from those schools. High school transcripts cannot be released by this office. Contact your high school principal.

**Student records are confidential and, in accordance with the Privacy Act of 1974 as amended, transcripts are issued only at the written request of the student.**

### Credit Card Information

Circle: **MCARD or VISA** Amount \$ \_\_\_\_\_

Name of Cardholder: (Please print)

ACCT # \_\_\_\_\_

3-Digit Code on Back of Card \_\_\_\_\_ Exp Date \_\_\_\_\_

PO Box or Street # only \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: \_\_\_\_\_

Total Charged \_\_\_\_\_

Amount Received \_\_\_\_\_

Date Transcript Mailed \_\_\_\_\_

Transcript Processed By \_\_\_\_\_