

MORGAN COMMUNITY COLLEGE

920 Barlow Road, Fort Morgan, CO 80701 www.morgancc.edu
970-542-3100 1-800-622-0216 FAX 970-542-3114



OFFICIAL TRANSCRIPT REQUEST FORM

Date Requested: _____ Social Security Number: _____

Date of Birth: _____ MCC Student ID: _____

Student Name: _____
Last First MI Former Name(s)

Address: _____

Change my Official Academic Records to reflect this address & phone

Phone: _____ Email: _____

Student Signature: _____

(Student signature required)

Transcript requests made by anyone other than the student will NOT be processed.

INSTRUCTIONS TO TRANSCRIPT OFFICE

- Transcript requests require a minimum of 3-5 working days to be processed
- Transcripts are not issued unless all financial obligations to the college are fulfilled
- Any transcript issued to a student directly will be stamped "ISSUED TO STUDENT"
- Many institutions will not accept documents stamped "ISSUED TO STUDENT"

- Process **immediately** (allow 3-5 working days plus mailing time). **Do not hold** for grades or degrees.
- Place in **official sealed envelope not to be opened** (when issued to student)
- Hold and process **after all grades have been posted** for current term & year
- Hold and process only **after grades & degree earned are recorded** for current term & year
- I attended MCC prior to 1987 and may have "hard copy" (non-computerized) transcripts

I will **PICKUP** transcript or I authorize _____ to pick up my transcript in 3-5 days.
Photo ID is required for pickup by student or authorized party. Number of copies for pickup: _____

*NOTE: Transcripts for pick up will be held for two weeks from the request date. If not picked up by that time, they will be destroyed.
A transcript issued for pickup will be stamped "ISSUED TO STUDENT" if not requested to be placed in an official sealed envelope
Many institutions will not accept documents stamped "ISSUED TO STUDENT"*

FAX transcript to FAX No: _____ in 3-5 days.

*NOTE: FAX Transcripts are NOT 'Official' and many institutions will not accept them.
It is **your responsibility** to be sure this is the type of transcript delivery your institution/other party will accept.*

MAIL transcript to address(es) listed below.

MAILING INSTRUCTIONS

(Indicate name and complete address of the institution/other party the transcript is to be mailed to)

Mail transcript to:	Mail transcript to:
Number of copies to this address:	Number of copies to this address:

Return Form to MCC Student Services Records Office