

Transcript Request Form

Last Name	Fire	st Name	
		·	
Date of Birth		Email	
Phone	Cata	alog Year	
Mailing Address:		City	State Zip Code
Transcripts will not be processed	if any financial obligations ar	•	. Please include receipt with request.
(GCC, IBC, and GIAT transcript	ts will be charged sepa	arately
Are you currently enrolled at GCC	•	-	ended:
Check all that apply to your atter		2000 . 300	cridea
□ Vocational High School □ Adu	It High School ☐GCC S	pecial Projects 🗆 🗆 IE	BC □GIAT
Transcript Options & Fees			
Processing time does not include	mail delivery time		
Туре	Processing Time	Cost of first copy	Cost for additional copies
Standard	Up to 5 working days	\$15.00	\$1.00
Same Day Rush Processing Time Frames:	Varies, see below	\$29.00	\$1.00
Requests received after	e 1:00pm Monday through T 1:00pm Monday through Thu e 12:00pm Friday will be read	ursday will be ready by	y 12:00pm next business day.
Number of Copies Requested:		□Same Day	□Standard
Special Instructions			
☐ Hold for grades ☐ Hold Delivery Method (Transcripts will	If for degree conferral		
☐ In person pick up (Picture ID wi			
□3 rd party pick up (Picture ID wil			
☐Mail:			
Institution/Name:			
Address Line 1:			
Address Line 2:			
City:		State:	Zip:
By signing below I authorize release of	of my Official Academic Transcri	pts to the party(ies) lister	d above.
Students Signature:			Date:
Business Office Only:		Admissions & Registrat	tion Only:
Financial Hold: ☐ Yes ☐ No		Date & Time Received:	
Amount Paid:		Processed By:	
Cashier Initials:		Date:	