COLLEGE OF THE REDWOODS

Transcript Request Form

All transcripts requested with faxed or mailed form are mailed within 10 working days of receipt of payment. If requested via WebAdvisor, transcripts will be mailed within 2 working days of receipt of payment.

Student ID # ☐☐☐☐☐☐☐ and/or

Social Security # ☐☐☐-☐☐-☐☐☐☐

Date: _____

*Please **PRINT** the following information:*

Student Name _____

Street/Mailing Address _____

City, State, Zip _____

Phone _____

Birth date _____

☐ **CHECK IF THIS IS YOUR NEW PERMANENT CHANGE OF ADDRESS**

List other names used at CR _____

Approximate semesters attended _____

Prior to Summer 1985? Yes ☐ No ☐

Official Transcripts are $5.00 each (first two are free) How many copies? ☐

Be sure to specify dept or person when applicable to above address

Visa or MasterCard																

Name on Card **Expiration Date**

Student Signature: _____

Mail transcript to:

☐ Send transcript now

☐ Send after degree posted

☐ Transcript to be held until grades are posted for

- ☐ Summer 20 ___
- ☐ Fall 20 ___
- ☐ Winter 20 ___
- ☐ Spring 20 ___

(current semester grades cannot be sent until approximately 3 weeks after semester ends)

☐ Certification of State College General Education Requirements

☐ Certification of IGETC General Education Requirements

☐ Hold for student pick-up

☐ Official Transcripts @ $5.00 each

☐ No Charge (the first two transcripts are provided free of charge)

FAX TO: 707.476.4406
Or
Mail to: Admissions & Records, District Office
7351 Tompkins Hill Road
Eureka, CA 95501

Total Amount Enclosed _____

Office Use Only