

Transcript Request Form

Students who request a transcript using this form should complete the entire form and print clearly. Submit this form by fax or mail to the VHCC Admissions Office. Note that official transcripts usually take 5 business days to process, but additional time may be required during heavy registration periods or grade processing times. **Transcripts will not be released for students with outstanding financial obligations to VHCC, and VHCC does not release transcripts or copies of transcripts from other institutions.**

For VHCC Use

Date Sent

Processed By

Fax: (276) 739-2591 or (276) 739-2590

Mail: Virginia Highlands Community College, ATTN: Registrar, P.O. Box 828, Abingdon, VA 24212

_____-_____-_____ **or** _____
Social Security Number Empl ID

Requests cannot be processed unless the SS# or Empl ID is provided.

Name: _____ Date of Birth ____/____/____
Last Former/Maiden First MI

_____-_____-_____ - _____ Currently Enrolled? Yes No
Phone Number Dates of attendance at VHCC
(Beginning Semester/Year & Ending Semester/Year)

Transcript Order Details

(Please choose one of the following options)

- I will pick up my transcript in the Registrar's Office Number of copies requested _____
 Please mail my transcript to the following address

Name: _____
The college, business or person to whom the transcript should be addressed

Street Address: _____

City: _____ State _____ Zip Code _____

Please check one option

- Please process Immediately
 Please process when grades have been recorded for the following semester _____
 Please process after I graduate from VHCC (check the appropriate semester below)
 Fall (Aug-Dec) 20 ____ Spring (Jan-May) 20 ____ Summer (May-Aug) 20 ____

My signature below authorizes the release of my academic record. Unsigned requests cannot be processed.

Signature (required)