

TRANSCRIPT REQUEST FORM

General Information:

- Transcripts will not be provided for students with financial or other obligations to the college.
- Please allow 1 week for processing.
- FedEx will not deliver to a post office box.

Contact information:

Student Records
Red Rocks Community College
13300 W. 6th Ave Box 8
Lakewood CO 80228-1255
Phone: 303-914-6352
Fax: 303-989-6919

Student Information: (PLEASE PRINT)

Student ID number _____ *

Name _____ *

Birth date _____ *

Former name used at RRCC _____

Dates of Attendance _____

Current Address _____ *

State _____ * ZipCode _____ *

City _____ *

Phone _____ *

*required fields

Special Requirements: (All transcripts are official.)

- No special requirement; **there is no charge for transcripts sent by regular mail.**
- Sealed: Enclosed in a sealed envelope with the Registrar's stamp across the flap. Some colleges will accept this as an official transcript. Check with the receiving college.
- Hold for current semester's grades
- Hold until degree is recorded
- Hold for change of grade: Course _____ Term _____

Signature _____ Date _____

Mail or Fax Transcript to:

Faxed transcripts will not be clear.

Name _____

Organization _____

Address _____

Address _____

City _____ State ___ Zip _____

Phone or Fax _____

Mail or Fax Transcript to:

Faxed transcripts will not be clear.

Name _____

Organization _____

Address _____

Address _____

City _____ State ___ Zip _____

Phone or Fax _____

Additional addresses may be entered on a blank piece of paper.

Payment for FedEx mailing:

Office Use: Total Charge _____
Post to A520

FedEx mailing: No. of transcripts _____ @\$20.00 = \$ _____

Circle method of payment: Cash Check MasterCard Visa Discover American Express

Credit card number _____ Expiration Date _____

Billing Information of the credit card holder:

Name _____

Billing Address _____

Phone _____

City _____ State ___ Zip _____