



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:

Student ID number _____
 Name _____ *
 Please print

Birth date _____ *
 Dates of Attendance _____

Former name used at RRCC _____
 Street Address _____ *
 State _____ * Zip Code _____ *
 *required fields

City _____ *
 Phone _____ *

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 _____ Phone _____
 Billing Address _____ City _____ State ____ Zip _____