

Red Rocks Community College Transcript Request Form

*Send this form directly to the RRCC Cashiers Office: 13300 West Sixth Avenue, Box 2 Lakewood, CO 80228-1255

Fax: 303-984-4831 / Phone: 303-914-6222 / Email: RRCC.CashiersOffice@rrcc.edu

General Information:

- Please allow one week for processing.
- Forms that are not filled out in full or filled out incorrectly may result in a delay in processing.

	Student ID number *Birth		
*Name		Former name used at RRCC	
*Current Address		Dates of Attendance	
*City, State, Zip		ne	
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*Signature		*Date	
F	Physical signature is required on form. We cannot accept an electronic s	signature.	
Special Requirem	nents: Hold for current semester's grades Hold	until degree is recorded	
~ Poolul 210 quar on	Attachment to be sent with transcript	unin degree is recorded	
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*Please select the	quantity and method of processing. Note – FedEx does not	deliver to a PO Box.	
Quantity	Method	Charge	
	Electronic Transcript (*Student will need to go through Parchment)	\$3.00	
	Paper Transcript – Mailed (USPS)	\$5.00	
	Paper Transcript – Mailed (International USPS)	\$8.00	
	Paper Transcript – Pickup	\$5.00	
Mail Transcript to	: Mail Transci	-	
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