



REQUEST FOR TRANSCRIPT

Directions: Complete all fields in the form. Fill out an additional request if a second copy is to be sent to another address. The form can be dropped off, mailed, or faxed. The fee payment must be received before the transcript can be prepared. All financial obligations to the college must be satisfied before a transcript can be released. Payment may be in the form of cash, check, or money order. Credit card payments are accepted in person or by phone at 706-355-5121.

Every attempt is made to properly mail requests, but the institution can assume no responsibility for final delivery.

STUDENT NAME AND ADDRESS

Name _____ Name when enrolled _____

Student ID or SSN _____ DOB _____

Email address _____ Phone # _____

Current address _____

Are you or were you a member of Phi Theta Kappa? Yes No

SPECIAL INSTRUCTIONS (Please check one box.)

- Issue current grades (current term will show as "In Progress" [IP] grades)
- Hold until final grades for current term have been posted (approximately 5 days after the close of each term)
- Hold for posting of degree, diploma, or certificate

DELIVERY OPTIONS (Please check one box.)

- \$5.00 Send electronically within 24 hours via E-Script-Safe (list email below)
- \$5.00 Mail in 24-72 hours to the address I provided below
- \$5.00 Pick up in 24-72 hours; please call me when ready to pick up
- \$25.00 Process while I wait on campus
- \$25.00 Process now and send via overnight packaging (additional shipping rates apply)

If the transcript will be picked up, a picture id is required to confirm identity.

Electronic transcripts: Ask the receiving schools/individuals if they accept electronic transcripts. ATC sends official transcripts electronically and securely using eSCRIP-SAFE®. The transcript is sent securely as an e-mail attachment (the e-mail is only used to notify the recipient of how to download the transcript). You receive an e-mail confirmation when it is sent and when it is opened by the recipient. Students enrolled before 1993 are not eligible for electronic transcripts.

Please issue _____ copy/copies to the recipient's name and address written below (use a complete physical address/email address and print plainly):

The Family Education Rights and Privacy Act of 1974 prohibits release of this information without the student's written consent.

X

(Signature of Student)

(Date)

FOR OFFICE USE ONLY		
Date Paid _____	Amount Paid _____	Date Transcript Sent _____