

OFFICE OF THE REGISTRAR

*Please note: your transcripts cannot be released if
you have any financial obligations to the college.*

Please print neatly below

Last Name: _____	First Name: _____
Student Number: _____	Mailbox: _____
Name while enrolled (if different from above): _____	

GENERAL INFORMATION:

Last Four Digits of Your Social Security Number (if applicable): _____

Major: _____ Program: Degree Diploma

PLEASE FILL OUT THE FOLLOWING IF YOU ARE NOT A CURRENT STUDENT:

First semester of attendance: _____ Last semester of attendance: _____

Have you graduated? Yes No Graduation Date: _____

I require (#) _____ OFFICIAL transcript(s)

OFFICIAL TRANSCRIPT: A college document with the college seal and the facsimile signature of the Registrar. An official transcript is usually issued directly to educational institutions or prospective employers. If issued to a student, it is placed in a sealed envelope, not to be opened by the student.

Check this box to include final grades from the current semester.

PLEASE FORWARD MY TRANSCRIPTS TO:

- Office of the Registrar (student pickup)
- My student mailbox
- Address below (Please use the back of this form for additional addresses.)

_____	_____
_____	_____
_____	_____

Student Signature _____ Date _____

Please return your completed form to the Office of the Registrar, 921 Boylston Street, Suite 120

Office of the Registrar Use Only

Processed by: _____ Date Completed: _____