

TRANSCRIPT REQUEST FORM

TO THE GRADUATE STUDENT:

- Please complete one (1) of these forms as soon as possible for each college/university you have attended.
- Contact each college/university you have attended and ask what fee(s), if any, must be paid with this request.
- Send a completed form and any required fee to each college/university from which you graduated or earned undergraduate and/or graduate credit.

DO NOT SEND YOUR COMPLETED FORM TO ASHWORTH COLLEGE!

Date Sent to Former College/University: _____

Student Name: _____

Circle One: Male / Female

Student Number: **GA** _____

Birth Date: _____

Social Security #: _____

Phone: _____

Maiden/Previous Name(s): _____

Email: _____

Name of Former College/University: _____

Address of Former College/University: _____

City: _____ State: _____ Zip: _____

Enrolled from _____ to _____ Phone: _____

Student Signature _____ Date _____

TO YOUR FORMER UNIVERSITY'S REGISTRAR:

- Please send a copy of the student's transcript showing courses taken, grades received, credits earned, and when/if the student earned a degree. No other information is necessary. If a fee is due for this service, please contact the student.
- Please include a copy of this form with the student's official transcript and mail to the address below.

Please send to: **ASHWORTH COLLEGE · TRANSCRIPT PROCESSING**
P.O. Box 923087 · NORCROSS GA 30010-3087