



OFFICIAL TRANSCRIPT REQUEST FORM

(RO-6/11)

Registrar's Office 200 High Street Glenville WV 26351 304-462-4117 FAX 304-462-8619

Student Name: _____ SSN or GSC ID#: _____

Previous Names (if applicable): _____

Current Address: _____

Phone/Cell Phone: _____ E-Mail: _____

Please check here if you attended prior to 1990. DOB: _____

Mail Fax** Pick Up
 Number of copies _____

Mail Fax** Pick Up
 Number of copies _____

ADDRESS	
Fax #:	
ATTN:	

ADDRESS	
Fax #:	
ATTN:	

Special Instructions: Hold for current term grades Hold for Degree Statement

Student Signature Required

Mailing address and fax number are listed above. Make checks payable to Glenville State College. Credit/Debit cards are accepted by including the information below or contacting 304-462-6120 once the official request has been received. We accept MasterCard, Discover, and Visa. You must have all financial/academic obligations satisfied with GSC or your request will not be processed. The request must be signed by the student. Unfulfilled requests due to unmet obligations are destroyed after 30 calendar days.

Date

\$ _____ Regular Processing and Faxed transcripts - \$5.00 each
 ** (Many colleges and universities do not consider faxed copies official)
 \$ _____ UPS Next Day Air - \$30.00 each (includes postage & transcript fee)
 **We cannot provide this service to APO addresses.
 \$ _____ Total Amount

Credit/Debit Card Number _____ Exp. Date _____ 3 Digit Security Code _____

***** OFFICE USE ONLY *****

Check/Money Order Cash Credit/Debit card Date Rcvd: _____ Initials: _____
 Date Mailed/P-UP: _____ HOLDS: _____ Notice Sent: _____