



# GLENVILLE STATE COLLEGE

# OFFICIAL TRANSCRIPT REQUEST FORM (RO-4/17)

Registrar's Office • 200 High Street • Glenville, WV 26351 • 304-462-4117 • FAX 304-462-8619 • [Registrar@glenville.edu](mailto:Registrar@glenville.edu)

Student Name: \_\_\_\_\_ SSN or GSC ID#: \_\_\_\_\_

Previous Names (if applicable): \_\_\_\_\_

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

Permanent Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Mail  Express Mail  Pick Up  
Number of copies \_\_\_\_\_

Mail  Express Mail  Pick Up  
Number of copies \_\_\_\_\_

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

TO:	
ADDRESS	

TO:	
ADDRESS	

*The Registrar's Office 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.*

\$ \_\_\_\_\_ Regular Processing - \$7.00 each

\$ \_\_\_\_\_ Express Mail - \$42.00 each  
\*\*Not available for PO Box and APO addresses.

\$ \_\_\_\_\_ Total Amount

**Unfulfilled requests due to unmet obligations are destroyed after 30 calendar days.**

Credit/Debit Card Number

Exp. Date

3 Digit Security Code

**Student Signature Required**

Date

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

Check/Money Order  Cash  Credit/Debit Card Amount Received: \_\_\_\_\_ Date Rcvd: \_\_\_\_\_ Initials: \_\_\_\_\_  
Date Mailed/Faxed/P-Up: \_\_\_\_\_ HOLDS: \_\_\_\_\_ Notification Made: \_\_\_\_\_ Initials: \_\_\_\_\_