



\$5 fee for each official transcript as of July 22, 2011.
STUDENT RECORDS WILL NOT BE RELEASED UNTIL
OUTSTANDING OBLIGATIONS ARE CLEARED BY THE STUDENT!

Name: Last First Middle or MI

Phone: ( ) - . Date of Birth:

Address: Street or PO Box Number
City State Zip
Student ID Number: or last four of SS# XXX-XX-

Name while enrolled, if different from above:

Should we: Issue the transcript now Hold until end of semester
Hold until graduation

Last term enrolled: YEAR: choose one: Fall Spring Summer

Picking up your transcript:

I will be picking up my transcript. YOU MUST BRING PHOTO ID!

Please allow the person listed below to pick up my transcript. By signing this form, I am authorizing the person listed below to receive my transcript. (This person must have a photo ID to pick up your transcript.) Allow 3-5 business days.

Print name of person picking up transcript

Have my transcript mailed to the address below:

MAIL TO: Name/Organization
Address
City State Zip

TRANSCRIPTS Curriculum (college) \$ 5.00
REQUESTED: Continuing Education \$ 5.00
Adult High School (not GED) \$ 5.00
TOTAL: \$

There is a \$5 fee for each transcript requested. Mailed payments can be made by money order only. Cash or credit card (MasterCard or Visa) payments can be made in the Cashier's Office, Building 2.

Signature:

Date:

Mail transcript request to: Robeson Community College, Business Services, PO Box 1420, Lumberton, NC 28359
Busines Office Fax: 910-272-3546. To arrange payment by VISA/MasterCard after form is faxed: 910-272-3453.

For Office Use Only
Transcript Fee Received Receipt # Amount Paid
PERC checked for payment Received by: (BO staff signature)