

TRANSCRIPT REQUEST FORM

Continuing Education Division



Lenoir Community College

P.O. Box 188 | Kinston, NC 28502-0188 | 252.527.6223

Occupational Extension Fax: 252.233.6880 | Public Safety Fax: 252.233.6885

Transcripts may also be requested online at <http://www.studentclearinghouse.org/>

Student's Signature

Date

Student Information

Student Full Name:

Last name while enrolled, if different:

Student ID / last 4 of SS#:

Date of Birth:

Address:

City/State/Zip:

Phone Number:

Copies Requested (Check One): 1 2

Mail **official** transcript to:

College/Department:

Contact Name:

Address:

City/State/Zip:

Fax or e-mail **unofficial** transcript to:

College/Department:

Contact Name:

Fax Number:

E-mail Address:

THERE IS A \$5.00 FEE PER TRANSCRIPT

OFFICE USE ONLY

Request Date

Fee Paid

Paid Date

Transcript Printed