

Barber-Scotia College
145 Cabarrus Avenue, West
Concord, NC 28025

Office of the Registrar
Transcript Request Form

Name (Last, First Middle)

Social Security Number
(Last 4 Digits)

ID Number

Street Address

City

State

Zip Code

Telephone Number

Are you currently enrolled at Barber-Scotia College?

Yes _____

No _____

If no, date of last attendance (month/date/year) _____/_____/_____

Transcript Processing Type:

Mail Now _____

Mail at the end of current semester _____

Picked up by student _____

Other _____

Name(s) and Address(es) where Transcript is to be sent:

Cost per transcript: \$10.00

Payment Type:

Cash _____

Money Order _____

Cashier's Check _____

No personal checks

Note: During peak times of Registration, Final Examinations, and Grading, responses to written transcript requests will be mailed within five to seven working days. Please allow ample time to process your request.

Signed by

Date