

TO ORDER AN OFFICIAL TRANSCRIPT :

PLEASE PRINT PLAINLY – THIS FORM WILL BE USED FOR MAILING PURPOSES

ID # OR SOCIAL SECURITY NUMBER : _____ / _____ / _____

DATE OF BIRTH (MONTH/DAY/YEAR): _____ / _____ / _____

LAST FIRST MI

STUDENT NAME

STUDENT ADDRESS
(CURRENT)
FOR WINDOW ENVELOPE

OTHER NAMES PREVIOUSLY USED : _____

PHONE : _____

ARE YOU CURRENTLY ATTENDING MT. SAC ? [] YES [] NO

IF NO, WHEN DID YOU LAST ATTEND ? _____

NUMBER OF COPIES : _____ \$ 2.00 EACH COPY

**STUDENT IS RESPONSIBLE FOR COMPLETE MAILING ADDRESS.
ONE ADDRESS PER FORM**

INDICATE THE ADDRESS TO
WHICH THE TRANSCRIPTS
ARE TO BE SENT IF DIFFERENT
THAN ABOVE.

FOR WINDOW ENVELOPE

YOUR TRANSCRIPT WAS MAILED: _____

IN ACCORDANCE WITH FEDERAL LAW, RECORDS CANNOT BE RELEASED WITHOUT THE WRITTEN CONSENT OF THE STUDENT.

X _____

OFFICIAL TRANSCRIPTS OF CREDIT EARNED AT OTHER INSTITUTIONS ARE NOT AVAILABLE FOR REDISTRUBUTION BY MT. SAC.

PLEASE ALLOW 5 TO 10 BUSINESS DAYS FOR PROCESSING.

**ONCE COMPLETED, MAIL REQUEST
ALONG WITH CHECK OR MONEY ORDER TO:
TRANSCRIPTS
MT. SAN ANTONIO COLLEGE
1100 N. GRAND AVE.
WALNUT, CA 91789 (909) 594-5611 X4415**

FOR OFFICE USE ONLY	
AMOUNT DUE: RETURN THIS FORM ALONG WITH YOUR REMITTANCE TO CLEAR THIS OBLIGATION.	\$.
AMOUNT PAID: CHECK CASH CARD	\$.
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DATE RECEIVED :	BY: