



SHELTON STATE
COMMUNITY COLLEGE

TRANSCRIPT REQUEST FORM

Please mail this request form directly to the Registrar of each college you have previously attended. If you have not attended other colleges, please send this form to the high school from which you graduated. Please retain a copy of this request and your check or money order as proof that you have requested your transcripts. Official transcripts must be mailed directly from the school.

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Registrar:

Please forward an official copy of my transcript at your institution to the following address:

Shelton State Community College
Attn: Admissions/Records Office
9500 Old Greensboro Road – Box 190
Tuscaloosa, AL 35405

Name: _____

Address: _____

Name under which enrolled if different from name given above: _____

Student Number/SS#: _____

Dates of Attendance and/or Graduation: _____

Signature: _____ Date: _____

NOTE TO THE STUDENT: Contact the school in which you are sending this letter to find out if there is a fee for sending a transcript.