



Transcript/Placement Test Release Form

Student ID Number

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or Social Security Number

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* Only complete forms will be processed.

Last Name		MI	First Name		Date of Birth MM/DD/YYYY	
Street Address						
City					State	Zip
Phone (Home)		Phone (Work)		Phone (Cell)		
Curriculum/Program		Are you currently enrolled? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, what year did you last attend?		
Did you use a different name when you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No		Last Name		First Name		Middle/Maiden Name

Transcript Release

- Student Copy (Unofficial and unsealed)
 - Mailed to the address above.
 - Student will pick up.
- Official Copy (Sealed)
 - Mailed to the address(es) listed. *(below)*
 - Student will pick up. *(ID req'd)*
 - Individual picking up official transcript. *(ID req'd)*
 - Mailed to the address above.
- Mail an official transcript only after final semester grades are included. This will take more time for pending graduates because we must wait for degree information.
Choose the appropriate term:
 - Fall Spring Summer
- Pending graduate? Yes No

- Fax Transcript (Unofficial)

Fax Number

Complete Name & Mailing Address

Location/Name/Address:	Copies

* Print additional requests on back of form.

Individual picking up official transcript:

Name:

Placement Test Score Release

Which test scores do you need? Mark one or both.

- COMPASS NC DAP English/Reading NC DAP Math
- Student Copy (Unofficial and unsealed)
 - Mailed to the address above.
 - Student will pick up.
- Official Copy (Sealed)
 - Mailed to the address(es) listed.
 - Student will pick up.
- Fax Test Scores (Unofficial)

Fax Number

Required Consent

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), a student's record(s) will not be released without prior written consent **by the student**. Students must also fulfill all financial obligations to the College before transcripts are sent. Official copies are \$5 each, and you will be required to show a photo ID.

Signature	Date
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Return the completed form to Student Services in the Jack Hunt Campus Center.
137 S. Post Road, Shelby, NC 28152
Phone: (704) 669-4081; Fax: (704) 669-4204
Website: www.clevelandcc.edu

OFFICE USE ONLY

Receipt Number:		Date:
Amount Paid:	ID Checked by:	
Picked up by (Initials):	Date:	