## NORTHEAST ALABAMA COMMUNITY COLLEGE Admissions Office P.O. Box 159 Rainsville AL 35986 256-638-4418 or 256-228-6001 Extensions: 2222 or 2260

## TRANSCRIPT REQUEST

Full Name under which enrolled

Date .

Send this completed form to the high school from which you graduated, the agency where you took your GED exam, or any college(s) you have attended in order to request an official transcript of your academic record.

Date of Birth

## PLEASE PRINT

Student Signature \_

SS#

Ch	eck one (1) bo	x. Please use a se	parate form f	for each request	
☐ High School	High School Name			Year of Graduation	
□ College	Previously attended College			Year(s) attended	
lease send one (1) copy of the following to: ORTHEAST ALABAMA COMMUNITY COLLEGE OFFICE OF ADMISSIONS O BOX 159 AINSVILLE AL 35986  Official college transcript High School Transcript (ACT scores) GED COMPASS test scores Transient Letter/Letter of Good Standing IEP, ADA, or SOP information (for Disability Services office)					

All transcripts MUST be sent directly from the forwarding institution to the Office of Admissions. Faxed documents may be sent to 256-638-6043.