

CLEARWATER CHRISTIAN COLLEGE

TRANSCRIPT REQUEST FORM

For mailing or faxing purposes only

CLEARWATER CHRISTIAN COLLEGE • Office of the Registrar • 3400 Gulf-To-Bay Boulevard • Clearwater, FL 33759-4595 • Fax: (727) 723-8566

Fees: 1 Official Transcript (and 1 unofficial sent to the student) \$5.00. Only 1 Unofficial Transcript is \$2.00. Other information is \$1.00 per page.
Payment methods: Cash, Check (make check payable to Clearwater Christian College), MC or DISCOVER (all faxed requests must include charge card number, security code and expiration date). **We accept only MC or Discover. 3 or 4 digit security code (on the back of the card):** _____ **Expiration Date:** _____
MC or Discover # _____

Transcript requests are processed as quickly as possible and are usually mailed within 2 business days following receipt, if all information is included and all financial obligations are cleared, except during peak periods.

Business office _____ **Financial Aid office** _____

TRANSCRIPTS CANNOT BE RELEASED UNLESS ALL FINANCIAL OBLIGATIONS TO CCC ARE CLEARED.

Name _____ **S.S. #** _____
Last First Middle Maiden

Address _____
Street Number and Name City State Zip Code

Phone Number () _____ **E-mail** _____

Address change for **You** **You and Your Spouse** **Spouse's Name:** _____
Last First M.I. (Maiden)

Dates Attended Clearwater Christian College: from Semester _____ Year _____, to Semester _____ Year _____

Please mail my (specify) Official Transcript or Unofficial Transcript to the following recipient(s):
 Other information please be specific _____

1. Name /Address of Recipient _____

2. Name /Address of recipient _____

3. Name /Address of recipient _____

Signature _____ **Date** _____

Update 12/1/11

In accordance to the 1974 Family Educational Rights and Privacy Act and applicable amendments, a request for a transcripts must be submitted in writing, signed, and dated by the person giving such consent. It should also include the name/address of the party who is to receive them.