St. Louis Community College

OFFICIAL TRANSCRIPT REQUEST

Office of the Registrar | 300 S. Broadway | St. Louis, MO 63102-2800

Faxed or emailed requests are **NOT** accepted. If mailing to the Registrar's Office, payment must be a check or money order, made payable to STLCC. Transcripts are not released if there is a **HOLD** on the student record or if this form is **incomplete**.

ID#: A _____ *OR* SSN: X X X X X _____

Name: _____ DOB: _____
(Last Name) (First Name) (MI)

Previous/Maiden/Other Names: _____

Current Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Alt Phone: _____

Would you like to use this as your mailing address on record with STLCC? ☐ YES ☐ NO Year First Enrolled: _____

Are you registered for the CURRENT semester? ☐ YES ☐ NO Graduation Year: _____

Student Signature: _____ Date: _____
Requests will **NOT** be processed without a signature.

TRANSCRIPT OPTIONS (Check ONE)

- ☐ Send now
- ☐ Hold for semester grades - ☐ Fall ☐ Spring ☐ Summer
- ☐ Hold for degree posting - ☐ Fall ☐ Spring ☐ Summer
- ☐ Hand-carry official transcript
  Note: This option is only available at the S. Broadway location.

TRANSCRIPT FEE

A $5.00 fee is charged for each transcript printed

Additional fees will be applied if the transcript is requested to be sent overnight, express, or through international mail.

PLEASE SEND TRANSCRIPT(S) TO:

No. Of Copies: _____

Person or Office: _____
Name of School/Organization: _____
Street Address: _____
City: _____ State: _____ Zip: _____

☐ 1 - Standard US Mail or Hand-Carry	No Additional Fees
☐ 2 - UPS Overnight Delivery	**Additional** $10.00 **(NO PO BOXES; NO CAMPUS BOXES)**
☐ 3 - USPS Express Delivery	**Additional** $25.00 **(OVERNIGHT TO MOST US LOCATIONS)**
☐ 4 - International to Canada or Mexico	**Additional** $25.00
☐ 5 - International Outside of Canada or Mexico	**Additional** $45.00

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Please contact the receiving school or organization to confirm receipt.

OFFICE USE ONLY

Cost: $_____
Cashier: _____
Campus: _____
Date: _____
Receipt#: _____