



Request for Transcript

ATTN: _____
(Name of high school, state GED office, college or testing office)

Type of Transcript Requested

- High School
- College
- CPT (please note that scores are accepted from CPCC, Caldwell CC & T1, Surry CC and Forsyth CC only)
- GED Certificate and Test Scores* Year Tested _____ Location _____
For GED tests taken in NC: Fax requests to GED Administrator, NC Community College System, 5024 Mail Service Center, Raleigh, NC 27699-5024.

Please send an official transcript of my record to the address shown below. To be official, the transcript MUST be sent in a sealed envelope. High school transcripts must indicate graduation date. Attach this form or a copy of this form to my transcript to ensure proper identification.

Law Enforcement Training Center

Mitchell Community College
701 West Front Street
Statesville, NC 28677

Student's Full Name _____

Name under which enrolled (if different from above) _____

Social Security Number _____ Birthdate _____

Current Address (city, state, zip) _____

Dates of Attendance _____ Graduation Date _____

Student Signature _____

Date Requested _____

Please Note: Most colleges and some high schools charge a fee to process transcript requests. Check with your school for the appropriate fee which must be enclosed with this request form.