



# REQUEST FOR TRANSCRIPT

**Print Legibly:** \_\_\_\_\_  
Date of Request                      No. of Transcripts                      Financial Aid Transcript (No Charge)

**Name:** \_\_\_\_\_  
Last                                      First                                      Middle or Maiden

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** (    ) \_\_\_\_\_

**Student ID:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Dates Attended:** \_\_\_\_\_

**EWVCTC Graduate?** Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, what year did you graduate?** \_\_\_\_\_

**Mail Transcripts To:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Please check the items below which are applicable:**
- \_\_\_\_\_ Mail transcript as soon as possible.
- \_\_\_\_\_ Mail transcript when grades for current semester are available.
- \_\_\_\_\_ Mail transcript when statement of degree is available.

**Signature:** \_\_\_\_\_

**Mail Request to:**  
**Eastern West Virginia**  
Community & Technical College  
316 Eastern Drive,  
Moorefield, WV 26836

**Do Not Write Below**

Date transcript mailed \_\_\_\_\_

There is no charge for the first (1) transcript  
Each additional transcript cost is \$5.00

Payment must accompany request.

Fee Required \$ \_\_\_\_\_

**Business Office Use Only**