



REQUEST FOR
OFFICIAL ACADEMIC TRANSCRIPT

EVERY EFFORT IS MADE TO ISSUE TRANSCRIPTS WITHIN TWO TO THREE WORKING DAYS AFTER WRITTEN REQUESTS ARE RECEIVED.

NAME (Present) LAST FIRST MI MAIDEN

THE FOLLOWING INFORMATION IS NEEDED TO LOCATE YOUR RECORDS (Please Print):

NAME ON YOUR RECORDS
SOCIAL SECURITY # DATE OF BIRTH
STREET/P. O. BOX ADDRESS
CITY STATE ZIP CODE
TELEPHONE NUMBER PROGRAM ENROLLED IN
DATE OF LAST ATTENDANCE AT FTCC:

NAME & ADDRESS OF INSTITUTE OR PERSON TO WHOM THE TRANSCRIPT IS TO BE MAILED or NAME AND FAX NUMBER IF TRANSCRIPT IS TO BE FAXED: (It is the student's responsibility to provide an accurate mailing address for the institute or person to whom the transcript is to be mailed. Transcripts that are mailed are certified with the college's seal and are sent to the institution/person designated below.)

NAME
MAILING ADDRESS
CITY/STATE/ZIP
FAX NUMBER:

Send Transcript Now Send Transcript After Current Semester/Session Grades are Posted

Is this transcript for cross-enrollment purposes? (Circle response) Yes No

SIGNATURE: DATE:

Request may be submitted to the Office of Student Affairs in person, via mail, or via fax.
Mailing address: Fletcher Technical Community College, P.O. Box 5033, Houma, LA 70361
Fax: 985-857-3763

FOR OFFICE USE ONLY: DATE REQUEST RECEIVED: RECORDS LOCATED: YES / NO TRANSCRIPT ISSUED: YES / NO DATE TRANSCRIPT ISSUED/MAILED: REASON TRANSCRIPT NOT ISSUED: SIGNATURE OF PREPARER: