

ctcLink ID

If you don't know your ctcLink ID, please include your SSN

_____-_____-_____



REQUEST FOR OFFICIAL TRANSCRIPT

- Please fax, mail or hand-deliver requests. We are unable accept email or telephone requests.
- Student must show photo ID to pick up transcripts in person. If a person other than the student will pick up transcripts for the student, that person must be named on this form and must show photo ID.
- Your request will be processed in seven to ten business days. **Transcripts are never emailed or FAXED.**

Student name and current address:			Please update my student record		
Note: Window envelopes are used. Please print clearly					
Name: _____			Former name(s): _____		
Address: _____			Birthdate: _____		
City _____		State _____		Telephone: _____	
ZIP _____			Attendance dates: _____		
Email address _____					

Receiver information

Send to: _____ # of copies: _____

Send to: _____ # of copies: _____

Student signature: _____

Date: _____ REQUIRED

Ordering information

_____ Total number of official transcripts requested

_____ Send immediately

_____ # of additional transcript(s) sent to student

_____ # Do not mail student will pick up in Bldg 4-105

Name person other than yourself if you cannot pick up your transcript (ID required):

Wait until: _____

Grades are posted: Sum Fall Win Spring

Degree is posted: Sum Fall Win Spring

Hold for grade change

Course title _____ QTR _____

Incorrect grade? _____ (for tracking)

Cost: \$7.25 per copy. Payment options: **1.** SUBMIT FORM WITH PAYMENT TO CASHIER. **2.** To use a credit card, complete the information below. Olympic College accepts MASTERCARD or VISA only. **3.** To pay by phone, have ctcLink ID and call the Cashier at 360-475-7181.

Check one: _____ MasterCard _____ VISA

Credit card #: _____ Security code: _____ Expiration date: _____