



TRANSCRIPT REQUEST FORM

There is no fee for transcripts. For faster service, official transcripts may be requested and unofficial transcripts may be printed by current & former students (who attended within the last 2 ½ years) by logging into myCommNet at: <http://my.commnet.edu>.

Complete and return this form to:

Capital Community College - Registrar's Office
950 Main Street
Hartford, CT 06103
Or Fax to: (860) 906-5119

Student Name: _____
(Last) (First) (Maiden)

Student ID#: _____ OR SS #: _____ Date of Birth: _____

Student Address: _____
(Street) (City) (State) (Zip)

Student Telephone: _____ Last Year In Attendance: _____

<p>Print <u>EXACT</u> name, office, and mailing address to which transcript is to be sent:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><i>Write "PICK-UP" if you plan to pick up your transcript(s) at the Registrar's Office. Photo ID required.</i></p>	<p>Handling Instructions:</p> <p>Type & Quantity <i>(check one):</i></p> <p><input type="radio"/> Official – Quantity: ____, <i>Limit 3</i></p> <p><input type="radio"/> Unofficial – <i>Limit 1</i></p> <p>Processing Instructions <i>(check one):</i></p> <p><input type="radio"/> Send transcript(s) now</p> <p><input type="radio"/> Hold for current semester's grades</p> <p><input type="radio"/> Hold until degree is posted</p>
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Processing Information:

Most requests are processed within 5 business days. During busy periods at the beginning and end of each semester, please allow up to 8-10 business days. For faster service, official transcripts may be requested and unofficial transcripts may be printed by students (who attended within the last 2 ½ years) by logging into myCommNet at: <http://my.commnet.edu>.

For questions about transcript requests, please e-mail CA-Registrar@ccc.commnet.edu or call (860) 906-5140. Transcripts will not be issued if a student has outstanding financial obligations to the college.

Authorization:

I authorize Capital Community College to release my transcript to the recipient named above.

Student Signature: _____ Date: _____

For Office Use Only	Date Sent:	By:
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