



Transcript Request Form

For use when requesting Official Transcripts - Return to Student Affairs or email: Registration@edisonohio.edu.
Transcripts may also be ordered online at <http://getmytranscript.org>

Last Name _____ First Name _____ M.I. _____

Student ID# or Last 4 of SS# _____ Current Phone Number _____

Years Attended: _____

I affirm that I am the above-named student. In compliance with FERPA, I hereby give my written consent and authorize Edison State Community College to release my academic record as noted. I understand that my account at Edison State Community College must be in good standing in order for my transcript request to be processed. It is the student's sole responsibility to ensure the mailing address is correctly listed.

Student Signature Date

Issue transcripts now

Hold transcripts until semester grades are posted: **CCP Student – Hold for HS Grades**

Hold transcripts until degree is posted: Fall Spring Summer

Number of Transcripts Requested

Method of Delivery *Note: Processing time does not include time through the US Postal Service*

_____ **Standard Processing** (No Fee) Transcripts will be mailed or available for pick up in two to three business days.

_____ **Rush Processing** (\$10 Per Transcript) Transcripts will be mailed or available for pick up in one business day.

Pick up my transcript (A Photo ID is required at the time of pick up.)

Mail my transcript _____
Name / College or University

Address

Address 2

City, State, Zip

FOR COLLEGE USE ONLY

PERC Checked: _____

Payment Information Cash Check American Express Discover MasterCard Visa

Credit Card # _____ Expires _____ Security Code _____