

OFFICIAL TRANSCRIPT REQUEST

PO Box 118067 | RG-M
Charleston, SC 29423-8067
PHONE 843.574.6129



Receipt Date & Initials

THIS FORM IS FOR CASH AND CHECK PAYMENTS ONLY.**DEBIT/CREDIT CARD PAYMENTS ARE ONLY ACCEPTED ONLINE. GO TO: <http://www.tridenttech.edu/>****NOTE: For Continuing Education transcripts, email: ce.reg@tridenttech.edu.****STUDENT INFORMATION** (Please print)

Student ID _____ Date of Birth _____

Student's Name _____
Last First MI

Name while Enrolled _____

Current Address _____
Street City State Zip

Phone Number _____ Email Address _____

Do you want this information updated with the College? ☐ Yes ☐ NoStudent Signature _____ Date of Request _____
(Required by Law)**ORDER INFORMATION**Did you attend prior to 1985? ☐ Yes ☐ No If so, which campus? ☐ Main ☐ Palmer

There is a \$10 fee per copy that must be paid to the Business Office. Please allow 3-5 business days for your request to be processed. Unofficial transcripts are available through TTC Express.

Number of Transcripts Requested _____

Check One (Pick-Up or Mail ONLY):☐ **Pick Up:** ☐ Berkeley ☐ Thornley ☐ Mt. Pleasant ☐ Palmer ☐ Dorchester

If you are unable to pick up transcript for yourself, indicate who is authorized to pick up the transcript(s).

Name _____ Date of Birth _____
(Photo ID is required when picking up.)☐ **Mail To:**

Name/School/Organization _____

Street Address _____

City _____ State _____ Zip _____

Check One (If this section is left blank, the transcript will be processed upon receipt of the request.):☐ Send now. ☐ After _____ grades are posted. ☐ After _____ degree is awarded.**FOR OFFICE USE ONLY**

Business Office Use

Hold _____ Contacted _____ Released _____