

# TRANSCRIPT REQUEST

## FROM HIGH SCHOOL OR COLLEGE RECORDS



### TO THE PRINCIPAL OR REGISTRAR:

I have applied to Appalachian Bible College for:

☐ FALL, 20\_\_\_\_ ☐ SPRING, 20\_\_\_\_

Please send a copy of my:

☐ COLLEGE TRANSCRIPTS ☐ HIGH SCHOOL TRANSCRIPTS

To: Director of Admissions  
Appalachian Bible College  
161 College Dr.  
Mount Hope, WV 25880

Please attach the personal data I have listed below to the transcript being sent to Appalachian Bible College.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PERSONAL DATA *(To be completed by student.)*

\_\_\_\_\_  
Last Name First Maiden/Middle Social Security Number

\_\_\_\_\_  
Address Last Term Attended (Yr.)

\_\_\_\_\_  
City State/Zip Phone

\_\_\_\_\_  
Name at time of enrollment if different from above Birth Date Grad Date