



**VIRGINIA INTERMONT COLLEGE - REQUEST FOR TRANSCRIPT**

THE FEE FOR EACH OFFICIAL TRANSCRIPT IS \$5.00. PROCESSING TIME IS 24 - 48 HOURS.

(YOUR ACCOUNT MUST BE IN GOOD STANDING WITH THE BUSINESS OFFICE TO OBTAIN A TRANSCRIPT.)

Date \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(Required for Record Verification)

Name (while attending Virginia Intermont) \_\_\_\_\_

Present Name and Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. (\_\_\_\_\_) \_\_\_\_\_

Dates of Attendance/Graduation:

From: \_\_\_\_\_ to \_\_\_\_\_  
Sem. & Yr. Sem. & Yr.

Number of Transcripts Requested: \_\_\_\_\_

Official Transcript \_\_\_\_\_ Student Copy \_\_\_\_\_

Special Instructions:

\_\_\_\_\_ Hold for posting of degree  
\_\_\_\_\_ Hold for grade change  
\_\_\_\_\_ Hold for final grades

\_\_\_\_\_  
**Student's Signature Required**

**REASON TRANSCRIPT IS NEEDED:**

- Transfer to another college
- Employment
- Scholarship application
- Personal use
- Graduate School
- Teacher Licensure
- Other please specify: \_\_\_\_\_

**PAYMENT TYPE:**

Cash: \_\_\_\_\_

Check #: \_\_\_\_\_

Money Order #: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Type: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

**Send Transcript to:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BUSINESS OFFICE USE ONLY:**

\_\_\_\_\_ Release Transcript  
\_\_\_\_\_ Hold Transcript

**Submit completed request form to the Office of the Registrar.**