



DYERSBURG STATE COMMUNITY COLLEGE

Transcript Request Form

Please complete all information and FAX completed form to 731/286-3325 or mail to:

Dyersburg State Community College

Office of Admissions and Records

1510 Lake Road

Dyersburg, TN 38024

- Transcripts will be issued free-of-charge for up to six copies per term. A fee of \$1.00 will be assessed for each additional transcript.
- Transcripts will not be issued until all debts or obligations to DSCC have been satisfied.
- Due to the costs involved, DSCC does not fax transcripts.

Name and Date of Birth:

Last: _____ First: _____ Middle: _____ Former Name(s): _____

Birth Date: MM: ____ DD: ____ YY: ____

Contact Information:

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: (____) _____

DSCC ID # _____ OR Last 4 Digits of SSN: _____

Are you currently enrolled? _____ Number of transcripts requested: _____

Check if Appropriate:

_____ Mail transcript now.

_____ I will pick up transcript at the DSCC One Stop Center on the Dyersburg Campus. Allow 3-5 days for processing.

_____ Hold transcript for the current term's grades.

_____ Hold transcript until degree is posted at end of term.

Release Academic Transcript to Name/Address (if different from above):

Individual's Name or Specific Office (if applicable): _____

Business or Institution: _____

Street Address: _____

City, State, Zip: _____

Individual's Name or Specific Office: _____

Business or Institution: _____

Street Address: _____

City, State, Zip: _____

Signature (Required) _____ **Date** _____