



Registrar's Office, 860-253-3017
170 Elm Street, Enfield, CT 06082

Student Transcript Request – FREE OF CHARGE

NEW: ALL REQUESTS MAILED IN MUST BE ACCOMPANIED BY A NOTARIZED AFFIDAVIT OF IDENTITY FORM. NO FAXES ACCEPTED. This notarized affidavit is required only once and will be kept on file in the Registrar's Office. (Form is also available online)

Official Transcript* Unofficial Transcript **

Please Type or Print Legibly

Student's ID Number _____ Date of Birth ____/____/____

Social Security Number _____ - _____ - _____

Mail Transcripts:

As soon as possible Last year in attendance _____

After grades for current term are posted Number of transcripts being requested _____

After grade change is recorded for _____ Check here if Notarized Affidavit of Identity form is on
course/semester file in the Registrar's Office

YOUR CURRENT NAME (FIRST, MIDDLE, LAST), ADDRESS AND PHONE:

LAST NAME, FIRST NAME _____
Include previous last name(s)

ADDRESS, CITY, ST, ZIP _____

PHONE: _____

PURPOSE TRANSCRIPT IS NEEDED: Transfer to another college Employment Personnel
 Other: _____

SEND TRANSCRIPTS:

TO: _____

ATTN: _____

STREET: _____

CITY/STATE/ZIP: _____

Student Signature (required) _____ Date ____/____/____

* Official Transcripts may be requested online by logging on to <http://my.commmnet.edu> (NetID and password required). Once logged in, click on Student Tab and click into Student Self-Service and follow on-screen instructions. (Affidavit of Identity form not required if requesting transcripts online or in person.) **Unofficial transcripts may be printed from student's my.comment.edu account. Please note for both official and unofficial: If you have not been a student in the Connecticut Community College system within the last 2 1/2 years, you will not be able to log in and will need to mail in this form.

Mail this form along with the Notarized Affidavit Identity form if it is not already on file with the Registrar's Office to:
ACC, Registrar's Office, 170 Elm St., Enfield, CT 06082

State of _____)

County of _____)

AFFIDAVIT OF IDENTITY

Before me, a notary public, personally appeared (Legibly print the name of the student/former student) _____, known to me to be the person whose name is subscribed to the foregoing document requesting the disclosure of specified personally identifiable student records maintained in College records and, being by me first duly sworn, declared that the statements therein contained are true and correct and the foregoing document was signed as his/her free act and deed.

Signature: _____

Subscribed and sworn to before me this _____ day of _____

(Notary Seal Required)

Signature of Notary Public
Printed Name of Notary Public:

Date Commission Expires:

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For College Registrar Use Only:

On _____ the student appeared before me and after providing satisfactory proof of identity that appeared to be valid consisting of:

CT Drivers License No. _____ Expiration date: _____

U.S. Passport No. _____ Expiration date: _____

Military ID (Branch of Service: _____) No. _____ Exp. date: _____

Other (describe in detail): _____

the student signed the attached Transcript Request in my presence.

Signature of Asnuntuck Staff : _____