

Transcript Request Form

For Office Use Only
Transcripts Requested:
Date Mailed:

INSTRUCTIONS

- 1. This form must be completed and signed by the person to whom the academic records belong.
- 2. Answer all items that apply by printing legibly (be sure to include maiden name or any other previous names).
- 3. Provide the complete name and address where you wish your transcript(s) to be mailed (i.e., the college, agency/office, or employer). If you are requesting transcripts to be sent to more than one address, please use separate forms.
 - If you want your transcripts sent electronically, please follow the instructions on our website to order through Parchment: https://northeast.edu/records-and-registration/transcript-request.
- 4. Send completed form(s) and payment to:

Admissions and Registration Northeast Community College P.O. Box 469 Norfolk, NE 68702-0469

- 5. There is a \$5.00 charge for each transcript copy mailed directly from our office. (no cash accepted)
- 6. Please allow a minimum of two business days for processing after your request form has been received. Processing times may be longer at the beginning and end of the semester. Transcripts will not be released if you have a past due financial obligation to the College.

PERSONAL INFORMATION					
Student ID or Social Security Number:		Date:			
Legal Name: Last Name	First Name		Middle Name		
Previous Last Name(s):					
Current Address:					
Street Birthdate:		City Phone #:	State	Zip Code	
☐ I am currently enrolled ☐ I am not currently enr	olled.	Year first attende	ed Northeast:		
Mailing Directions					
 Number of transcripts requested (\$5/copy):	(Please Indicat	e additional request in ol/Recipient Name e (i.e., Admissions, Re	dress below. agency or business national on the back	·	
NOTE: A photo ID is required when picking up a transcript.	City	Sta	ate	Zip	
PAYMENT INFORMATION (NO CASH ACCEPTED) Amount to be charged (\$5/Copy): \$ Payment in full by credit or debit card Exp. Date: Visa MasterCard Discover 3 Digit V Code: Cardholder Name:	 	Payment	ed (\$5/Copy): \$		
Cardholder Signature:		Student Signati	ure:		