



29300 Lankford Highway, Melfa, VA 23410
Office of Student Services: 757 789-1728 Fax: 757 789-1737 V/TDD: 757 789-1738

REQUEST FOR ACADEMIC TRANSCRIPT

(Please print. Allow two weeks for processing. ESCC does not release transcripts or copies of transcripts from other colleges. There is no charge for transcripts. Multiple copies may be sent to employers or universities but only one copy may be sent to the student per semester.)

Date of Request: _____

Name (Last, First, Middle): _____

Mailing Address: _____

Phone: _____

Name at Time of Enrollment: _____

Social Security Number: _____ ESCC ID Number: _____

Currently Enrolled: ___ Yes ___ No Dates of Attendance: From _____ To _____

Mail Transcript to: _____

Street Address or P.O. Box: _____

City: _____ State: _____ Zip: _____

Student's Signature: _____