

**Randolph College
Transcript Request Form**

Complete this form and mail to:

**Randolph College
ATTN: Registrar's Office
2500 Rivermont Ave.
Lynchburg, VA 24503**

Date of Request:

Last Name	First Name	M.I.
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Social Security Number:

Graduation Year: _____

If not currently enrolled, last year attended: _____

Name while enrolled:

Current Phone Number:

Current Address:

Send Transcript To:

For Overnight Service, street address is required for delivery.

Number of Copies _____
Include tutorials from Reading University _____

Mailing Options:

- ___ Regular Mail – Processed in 3-5 business days
- ___ Will pick-up transcript
- ___ Mail after grade change for _____
- ___ Mail after semester grades are posted
- ___ Mail after degree is posted

Fees: ___ \$5 per official transcript.
___ Add'l \$10 for 24 hour service.
___ Add'l \$30 for Overnight Service (per destination).
Request must be received by 12 pm EST.
Continental USA only.

College debts must be cleared.

Reason for sending transcript:

- ___ Certification ___ Employment ___ Grad School
- ___ Personal Copy ___ Scholarship ___ Transferring

Signature

Addresses being sent via email. To speed up the processing time, if you are requesting transcripts be sent to more than three addresses, *in addition to the signed request*, please email a MS Word document containing the addresses to kspeer@randolphcollege.edu.