

TRANSCRIPT REQUEST

Are you currently enrolled?_	If not, last date	attended?
Were you enrolled prior to Fall 1979?	□ Yes □ No	
Campus last attended?	Jackson County Campus George County Center Keesler Center/Navy B Community Campus/Advanced Manufacturing and Technology	ase West Harrison County Center
GCID/SSN:	Birth Date:	
	-	
(Please print clearly)		
Please list the number of copies in	one of the following options:	
	Will pick up E-script/Electronic	<u></u>
_	Send immediately	
Mailian Address		
Phone number		
Former or Maiden Name		
Please list any other name(s) under v	vhich you might have attended:	
individual will not be released to any other. I have been given the opportunity to ch	contained in the Family Education Rights and Privacy Act of 1974, or party without the written consent of the above named student. allenge the contents of my school records to insure that the school and have been provided an opportunity for the correction or deleting	records are not inaccurate, misleading or otherwise
FAXED COPIES TRANCRIPTS ARE \$3	8.00 EACH.	
Student Signature:	Date:	
	PLEASE READ CAREFULLY!	
If your record has been encumber the obligation has been cleared.	ed by financial indebtedness or admission requirements have no	t been met, no transcript can be issued until
High School transcripts CANNOT I	BE RELEASED by this office. Please contact your high school.	
TRANSCRIPTS FROM OTHER COLLEGES or UNIVERSITIES that have been sent to our office for our files CANNOT BE COPIED. Additional copies must be obtained directly from the schools.		
Students' records are confide	ential and transcripts are issued only at the request of	the student.

www.mgccc.edu

SSADM10 (R 1/18)