



AUTHORIZATION FOR TRANSCRIPT RELEASE

• **It is the responsibility of the applicant to request a transcript(s) from the last high school attended and from all colleges attended.**

• Transcripts from colleges **must be official** (either mailed to DCCC Admissions from the college(s) attended or delivered to DCCC Admissions in a sealed envelope.) Faxed copies are **not** official.

• High school and AHS/GED transcripts **do not have to be official** and can be mailed, hand carried, or faxed to the Admissions Office (fax: 336.224.0240).

• **Most schools and colleges charge a fee for processing this request.** Fee information is usually available on the school/college’s website under Registrar, Student Records, or Transcripts. You may also call the school/college to obtain information on their transcript fees. **It is the responsibility of the student to pay the transcript fees.**

• Please complete a separate form for each school/college attended. Additional forms may be obtained from the Admissions Office (Enrollment Services) or the DCCC website at www.davidsonccc.edu.

I hereby authorize the following school to send a copy of my transcript to:

Admissions Office • Davidson County Community College • P. O. Box 1287 • Lexington, NC 27293-1287 • 336.249.8186 ext. 6731 (Please print all information clearly.)

School Attended _____

Address _____

My Name _____

Name under which I attended (if different from above) _____

My current mailing address _____

Home Phone _____ Cell _____ Work _____

Date of Birth _____ Social Security _____

Dates of Attendance or Graduation Date _____

I understand that it is my responsibility to determine the required payment for transcript release and include payment with this form.

Signature _____ Date _____