OFFICIAL TRANSCRIPT REQUEST FORM
JEFFERSON COMMUNITY & TECHNICAL COLLEGE

DOWNTOWN CAMPUS
ATTN: OFFICIAL TRANSCRIPTS
109 E. BROADWAY
LOUISVILLE, KY 40202

SOUTHWEST CAMPUS
ATTN: OFFICIAL TRANSCRIPTS
1000 COMMUNITY COLLEGE DR.
LOUISVILLE, KY 40272

JEFFERSON TECH. COLLEGE
ATTN: OFFICIAL TRANSCRIPTS
727 W. CHESTNUT
LOUISVILLE, KY 40203

TRANSCRIPT REQUESTS ARE PROCESSED ON A FIRST-COME, FIRST-SERVED BASIS ACCORDING TO THE DATE THE REQUEST IS RECEIVED. NORMAL PROCESSING TAKES 3-5 BUSINESS DAYS.
PAYING WITH A PERSONAL CHECK WILL DELAY PROCESSING BY AT LEAST TWO WEEKS.

PLEASE HOLD MY OFFICIAL TRANSCRIPT UNTIL MY CURRENT TERM'S GRADES HAVE BEEN POSTED (check if desired) _____

PLEASE HOLD MY OFFICIAL TRANSCRIPT UNTIL MY DEGREE FROM THE CURRENT TERM HAS BEEN POSTED (check if desired) _____

1. PRINT NAME: _____
LAST FIRST MI MAIDEN

2. NAME ATTENDED UNDER: _____

3. ADDRESS: _____
NUMBER & STREET NAME CITY STATE ZIP

4. STUDENT ID NUMBER: _____ SOCIAL SECURITY NO.: _____

5. DATE OF BIRTH: _____ PHONE NUMBER: _____

6. EMAIL ADDRESS:_____

7. I LAST ATTENDED IN:_____ I GRADUATED IN:_____ CAMPUS ATTENDED:_____

8. DID YOU ATTEND JEFFERSON COMMUNITY & TECHNICAL COLLEGE **PRIOR TO SUMMER 1987?**
IF YES, PLEASE INDICATE WHICH CAMPUS YOU ATTENDED BY ENTERING THE LAST YEAR ATTENDED:

JCTC-DOWNTOWN: _____ YEAR JCTC-SOUTHWEST: _____ YEAR JCTC-TECH: _____ YEAR

(Questions 1 through 8 are important. Please answer as many as possible to ensure timely processing of your request.)

PLEASE NOTE: IF YOU ATTENDED PRIOR TO SUMMER 1987, IT MAY TAKE LONGER TO RESEARCH YOUR ACADEMIC HISTORY.

NUMBER OF COPIES REQUESTED: _____ **TRANSCRIPT FEE: $5.00 PER COPY**

☐ I WILL PICK UP MY TRANSCRIPT***

☐ PLEASE MAIL MY TRANSCRIPT TO THE FOLLOWING ADDRESS:

*****TRANSCRIPTS FOR PICK UP, OR MAILED TO THE STUDENT, WILL BE STAMPED: "ISSUED TO STUDENT"**

NAME / INSTITUTION: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

DEPARTMENT (IF NEEDED): _____

STUDENT'S SIGNATURE: _____ DATE: _____

ANSWER CENTER

REC'D BY:_____
DATE REC'D:_____

CIRCLE ONE FOR FEE:

QP LEGACY ONLY

BURSAR'S OFFICE

AMOUNT PAID:$_____

PMNT TYPE:_____

REC'D BY:_____

DATE REC'D:_____

RECORD'S OFFICE

REC'D BY:_____

DATE REC'D:_____

PMNT TYPE:_____

AMOUNT PAID:$_____