

# TRANSCRIPT REQUEST FORM



All transcripts are sent via U.S. First Class Mail.

PLEASE TYPE OR PRINT CLEARLY

Student's Name \_\_\_\_\_  
Last First MI Maiden/Former Name

Student I.D./Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
(\_\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_ Telephone No. \_\_\_\_\_ Student Signature-request will not be processed if omitted.

I authorize OHLONE COLLEGE to release my official transcripts to the following:

ENTER NUMBER OF COPIES: \_\_\_ for **STUDENT PICK-UP** at the Admissions and Records window.

CIRCLE ONE: Normal • *Special Handling* • Express\*

By federal law, Ohlone cannot release transcripts to anyone else without the student's written authorization and a picture I.D.  **STUDENT PICK-UP**

ENTER NUMBER OF COPIES: \_\_\_ to be **MAILED** to address below.

CIRCLE ONE: Normal • *Special Handling* • Express\*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ENTER NUMBER OF COPIES: \_\_\_ to be **MAILED** to address below.

CIRCLE ONE: Normal • *Special Handling* • Express\*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

ENTER NUMBER OF COPIES: \_\_\_ to be **MAILED** to address below.

CIRCLE ONE: Normal • *Special Handling* • Express\*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE NOTE:** Transcripts will only include Ohlone College courses that have grades. To have In-Progress Courses included with transcripts, a printout of In-progress courses must be submitted with this form. In-progress courses can be printed directly from the Web via WebAdvisor.

**Transcripts cannot be released if the student has a Hold placed on their record. Once the Hold has been cleared, the transcript will automatically print the next business day.** \*Express processing is **not available** during **LATE** registration periods.

All transcripts not picked up within one month of request will be shredded.

**PLEASE SELECT PROCESS NEEDED:** *Indicate type of special handling if needed.*

**NORMAL PROCESSING** --\$4.00 each, 5 business days.

**HOLD** until end of current term

**HOLD** until degree is posted

**ENCLOSED ATTACHMENT** to be included

**EXPRESS PROCESSING\*** --\$10.00 each, next business day after 4 p.m.  **ENCLOSED ATTACHMENT** to be included.

\*Express processing is **not available** during **LATE** registration periods.

**PLEASE SELECT TYPE OF PAYMENT:**

**VISA/MASTERCARD/AMEX/DISCOVER**

You must complete the Credit Card Payment Form on the next page.

**CHECK**—make payable to Ohlone College

Check # \_\_\_\_\_ Amount \_\_\_\_\_

Include student ID number on check.

**OFFICE USE ONLY—COMPLETE AND INITIAL ACCORDINGLY** Arrived by:  Drop Box  Window  US Mail  Other

Form received by: \_\_\_\_\_ 1<sup>st</sup> free \_\_\_\_\_ 2<sup>nd</sup> free \_\_\_\_\_ \$10 x \_\_\_\_\_ \$4 x \_\_\_\_\_ Other \$ \_\_\_\_\_ Payment Type \_\_\_\_\_

Entered into TRRQ by: \_\_\_\_\_ Date: \_\_\_\_\_ Payment Sent to Cashier by: \_\_\_\_\_ Date: \_\_\_\_\_  Student pick-up

Notes: \_\_\_\_\_

Office of Admissions and Records, Ohlone College, 43600 Mission Blvd., Fremont, CA 94539

Phone: 510-979-7545 Fax: 510-659-7321 Email: [transcripts@ohlone.edu](mailto:transcripts@ohlone.edu)

January 21, 2009



# Transcript Credit Card Payment Form

Attention: Transcripts  
Fax Number: (510) 659-7321

**Note:** All of the following information is required to process your payment.

**PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION CLEARLY:**

Student's Name: \_\_\_\_\_

Last

First

MI

Student I.D./Social Security Number: \_\_\_\_\_

Print name as it appears on credit card: \_\_\_\_\_

Address to which credit card bill is sent: \_\_\_\_\_

Street Address

\_\_\_\_\_

City

State

Zip Code

Phone Number

Select credit card type:  VISA  MasterCard  Amex\*\*  Discover

Enter credit card number: \_\_\_\_\_

\*Enter the three or \*\*four CCV numbers located on back of credit card: \_\_\_\_\_ See below for details.

Enter expiration date: \_\_\_\_\_ (MM/YY)

Enter amount to be charged: \$ \_\_\_\_\_

Signature of Credit Card Holder: \_\_\_\_\_

\* The CCV number (Credit Card Verification or Card Code Verification) is the three digits on the back of the Visa, MasterCard, and Discover credit cards. The full credit card number and the CCV number are reprinted in the signature box and the last three numbers in that number sequence is the three digit CCV number.

\*\* American Express credit card may have a three- or a four-digit CCV number on the back of the card.

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Office of Admissions and Records, Ohlone College, 43600 Mission Blvd., Fremont, CA 94539  
510-979-7545 or [transcripts@ohlone.edu](mailto:transcripts@ohlone.edu)

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