

This form is only to be used by students who attended CMC prior to Summer 1982. ALL other transcript requests should be ordered online at www.coloradomtn.edu/transcripts

TRANSCRIPT SERVICE FEE

\$2.85 (Mail Delivery Only)

Please Note! Transcripts will not be issued if there is a HOLD or restriction on your account. All official transcripts must be issued from the **Registrar's Office**. Transcripts sent directly to Students will be stamped "Official Transcript-Issued to Student" and may not be accepted as valid by other schools or agencies.

Student Information:

Last Name	First Name	MI
Address: Street or P.O. Box	City	State ZIP Code

Student Id#	_____
Date Of Birth	_____
Other Names Used At CMC	_____
Year(S) Attended	_____
Campus Location(S)	_____

Reason For Transcript Request	
	Personal
	Employment
	Transfer
	Other

Please send my Official Colorado Mountain College Transcript(S) to:

Institution/Individual: _____

Attn: Office/Individual: _____

Address: Street/PO BOX	City	State ZIP Code
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Payment Information: We are no longer authorized to accept written payment information. Please call the Registrar's Office to submit payment over the phone: 970-947-8333 - Your transcript request will not be processed until we have received payment.

Student Signature: _____ Date: _____

Phone Number: _____