

Instructions: PRINT FIRMLY. (1) Complete all 6 items in ink. (2) Submit this form to the Office of the Registrar. Requests are processed in the order received. Please allow 10 days for delivery.

NOTE: No transcripts will be sent for anyone whose account with the College is not clear. There is no fee for a transcript sent to a unit of The City University of New York, all other transcripts cost \$7.00.

| 1 | Print the last 4 digits of SS# and CUNYfirst ID #, in the spaces | 1 | | AST FO | | | | | | CUNYFI ID# | RST | | | | | | | | |
|---|--|--|------------------------|---------|------------|------------|-------------|--------|-------------|---------------|----------|----------|---------|----------|----------|---------|------|------|--|
| | provided in Box # 1. | YOUR CURRENT NAME DATE OF BIRTH (DD/MM/YY) | | | | | | | | | | | | | | | | | |
| 2 | Print your current name and contact information in Box #2. | ADDRESS CITY STATE ZIP | | | | | | | | | | | | | | | | | |
| | | AL | DDK | .E35 | | | | | | | | , | CITY | | | 3 | IAIE | ZIP | |
| 3 | Please answer the questions by checking the appropriate boxes | EMAIL TELEPHONE | | | | | | | | | | | | | | | | | |
| | on line #3. | | 2 CHECK APPROPRIATE | IATF | | | HOLD FOR | | HOLD FOR | A- | TTENDE | D. AETER | 2000 | OR: BEFC | D. BEEOI | NE 2000 | | | |
| 4 | Print EXACT Name and address where transcript is to be sent within Box #4. | BOXES | | | FIN. GR | AL ADES | | DEGREE | ^ | ITENDEL | J. AFIER | . 2000 _ | | K. BEFOR | KE 2000 | | | | |
| | | 4 | | лАIL TR | RANSCR | RIPT TO | | | | | | | | | | | | | |
| 5 | Print name on line #5 at QCC if different than in Box #2. | | | | | | | | | | | | | | | | | | |
| 6 | You MUST sign this form to | | | | | | | | | | | | | | | | | | |
| O | release your record on line #6. | | | | | | | | | | | | | | | | | | |
| | Transcripts can be ordered online at: | _ | PR | RINT N | AME AT | QCC IF | DIFFER | NT FRO | M # 2 | | | FERPA R | REQUIRE | D STUDE | NT'S SIG | GNATUR | E | DATE | |



Pink – Bursar Copy

Instructions: PRINT FIRMLY. (1) Complete all 6 items in ink. (2) Submit this form to the Office of the Registrar. Requests are processed in the order received. Please allow 10 days for delivery.

NOTE: No transcripts will be sent for anyone whose account with the College is not clear. There is no fee for a transcript sent to a unit of The City University of New York, all other transcripts cost \$7.00.

| 1 | Print the last 4 digits of SS# and |
|---|------------------------------------|
| | CUNYfirst ID #, in the spaces |
| | provided in Box # 1. |

www.qcc.cuny.edu/registrar/orderTranscripts.html

05/2016 604-16

- 2 Print your current name and contact informa
- 3 Please answer th checking the app on line #3.
- 4 Print EXACT Nar where transcrip within Box #4.
- 5 Print name on li different than in
- 6 You MUST sign to release your rec

| contact information in Box #2. | ADDRESS | CHY | STATE ZIP | | | | |
|--|---|--------------------------------------|-----------|--|--|--|--|
| Please answer the questions by checking the appropriate boxes | EMAIL | TELEPHONE | TELEPHONE | | | | |
| line #3. | 3 CHECK HOLD FOR FOR FINAL | HOLD FOR ATTENDED: AFTER 2000 OR: BE | FORE 2000 | | | | |
| Print EXACT Name and address | GRADES | DEGREE | | | | | |
| where transcript is to be sent within Box #4. | 4 MAIL TRANSCRIPT TO | | | | | | |
| Print name on line #5 at QCC if different than in Box #2. | | | | | | | |
| | | | | | | | |
| You MUST sign this form to | | | | | | | |
| release your record on line #6. | | | | | | | |
| Turnersints are be and and online at | PRINT NAME AT QCC IF DIFFERENT FROM # 2 | FERPA REQUIRED STUDENT'S SIGNA | TURE DATE | | | | |
| Transcripts can be ordered online at: www.qcc.cuny.edu/registrar/orderTranscripts.html | 5 | 6 | 6 | | | | |
| | | | | | | | |

05/2016 604-16

White - Registrar's Copy

White - Registrar's Copy

LAST FOUR

DIGITS SS#

YOUR CURRENT NAME

Pink – Bursar Copy

Yellow – Student Copy

6

CUNYFIRST

Yellow – Student Copy

DATE OF BIRTH (DD/MM/YYYY)