



# TRANSCRIPT REQUEST FORM

**DIRECTIONS:**

To get a copy of your transcript:

- 1) Print this form.
- 2) Fill it out.
- 3) Mail it to the campus you attended. (Campus addresses are listed on the Contact Heald page of this website. If your campus is not listed there, mail this form to the Corporate and Admissions Office.)

NOTE: *There will be a transcript fee of \$5 for official transcripts.*

PLEASE SEND A COPY OF MY TRANSCRIPT TO:		
Name of Employer or College		
Street Address 1		
Street Address 2		
City	State	Zip

STUDENT INFORMATION:		
Full Name at Time of Enrollment		
Street Address 1		
Street Address 2		
City	State	Zip
Phone Number (    )	Date of Birth (00/00/0000)	Social Security Number
Campus	Year Attended or Graduated	

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Sign Here

Date