



# Rocky Mountain College

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## OFFICIAL TRANSCRIPT REQUEST FORM

Transcript requests will be processed within 2-3 business days.  
\$10.00 each, to a maximum of \$30.00 per request.  
Payment must be received before the transcript is sent.

### PERSONAL INFORMATION

Student ID: \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Maiden Name (if applicable) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Email \_\_\_\_\_ Telephone \_\_\_\_\_

Former student of:  HCC  MVBC  RMC

### TRANSCRIPT ORDER

Send transcript:

Official Transcript	Unofficial Transcript
<input type="checkbox"/> In a sealed envelope to the address above	<input type="checkbox"/> Sent to the address above
<input type="checkbox"/> In a sealed envelope to the address below	<input type="checkbox"/> Sent to the address below
<input type="checkbox"/> Please hold for pick up	<input type="checkbox"/> Please hold for pick up

- Immediately or  Immediately and after
- Fall Marks
  - Winter Marks
  - Spring Marks

No. of copies	Institution	No. of copies	Institution
	Institution: _____ Attention: _____ Address: _____ _____ _____		Institution: _____ Attention: _____ Address: _____ _____ _____
	Institution: _____ Attention: _____ Address: _____ _____ _____		Institution: _____ Attention: _____ Address: _____ _____ _____

Signature: \_\_\_\_\_ Method of Payment:  Debit  Cash  Cheque  Mastercard  Visa

Name on Card: \_\_\_\_\_ Card #: \_\_\_\_\_ Exp.: \_\_\_\_\_

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**OFFICE USE ONLY:**

Date requested: \_\_\_\_\_

Date sent: \_\_\_\_\_

Payment due: \_\_\_\_\_

Payment received: \_\_\_\_\_

\$10.00 each, to a maximum of \$30.00 per request

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