

**SANDHILLS COMMUNITY COLLEGE**  
3395 Airport Road \* Pinehurst, North Carolina 28374  
Phone: (910) 695-3740 Fax: (910) 695-3981

<b>Business Office Only:</b> Amount Received: \$ _____ Date Received: _____ Received by: _____ Holds Checked/Removed: _____
<b>Records Office Only:</b> Date Processed: _____

# Online Transcript Request Form

## Student Information (please print):

\*Complete this request form completely. Failure to provide all information could cause a delay in processing your request.

\_\_\_\_\_ (Current Last Name) (First Name) (Middle) (Previous or Maiden Names)

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

City & State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last Year Attended: \_\_\_\_\_ Student ID#: \_\_\_\_\_

(Do not write your social security number here)

*In compliance with the Family Educational Rights and Privacy Act of 1974, it is the policy of Sandhills Community College not to release this transcript to any individual, agency, or organization without the written & signed consent of the student.*

Signature of Student (Required): \_\_\_\_\_ Date \_\_\_\_\_

Transcripts are processed within 2-3 business days. We do not fax transcripts.

### Write the number of transcripts needed in the appropriate box:

Unofficial Transcript - No charge

Official Transcript - \$3.00

_____	HOLD until current semester grades are posted.
_____	HOLD until degree is posted.

### Check one of the following:

( ) I will **PICK-UP** my transcript in 2-3 days. (Picture I.D. required upon pick-up)

( ) I give permission for someone else to **PICK-UP** my transcript. (I.D. required upon pick-up)

The person picking up my transcript is : \_\_\_\_\_

( ) Please **MAIL** my transcript to the following complete address:

\_\_\_\_\_  
\_\_\_\_\_  
Street Address \_\_\_\_\_  
City, State & Zip Code \_\_\_\_\_

If you want to send this request via fax, print your Mastercard or Visa credit or debit card number below (**include the expiration date and the amount of your payment**) and fax to (910) 695-3981 or mail your check or money order to:  
**Sandhills Community College, Attn: Transcripts, 3395 Airport Rd., Pinehurst, NC 28374**

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

**ALL financial obligations to Sandhills Community College must be met before transcript can be issued.**