

Personal Transcript request from CCU to other schools

To: Current student/Alumni: Please use this form to request a personal or an official copy of your transcript from Cornerstone Christian University. This copy of your transcript will be stamped "Student Copy," "Official Copy Issued to Student" or issued to the institution of your choice based on your request. There is a fee of \$10.00 for each student and \$10.00 for each official copy requested. Official copy will be stamped "Official Copy to: (institution)

To: Name of school you wish to send transcript to	- REQUEST FOR TRANSCRIPT - Please send a copy of my transcript to:
Name of Department	
Street Address or P. O. Box	 [] Official copy [] Student Copy [] # of additional copies
City, State and Zip Code	Fee enclosed: <u>\$</u>

Signature of student/Alumni

Date of your request

Student making this request

FROM:

Student Name	Student Maiden Name (if applicable)
Social Security Number /Student ID:#	Years attended
Present Address	City, State and Zip Code
Student's Signature	Date of request

Previous Address

City, State and Zip Code

PEALSE NOTE: PERMANENT ACADEMIC RECORD IS NOT PERMITTED TO BE RELEASED TO A THIRD PARTY WITHOUT THIS WRITTEN PERMISSION FROM THE STUDENT. IT IS A VIOLATION OF THE PRIVACY ACT. IF YOU ARE NOT THE PERSON NAME ABOVE IN THE REQUEST, CANCELL THIS REQUEST NOW.

Cornerstone Christian University P.O. Box 585477. Orlando, FL 32858 (407) 295-4869 www.ccudl.com myadmissions@ccudl.com