



Transcript Request Form

Prospective Student: Please complete the entire form (with signature and date) and mail or fax it directly to each school/college/university from which you received your high school diploma or post-secondary (college, university) courses. It is very important that we receive your transcript(s) before being accepted for admissions and/or to be approved for financial aid.

CURRENT NAME _____
Last First MI

ALL OTHER NAMES USED IN THE PAST _____

BIRTHDATE: ____/____/____ SOCIAL SECURITY# ____-____-____

CURRENT HOME ADDRESS: _____

Street/PO Box

City

State

ZIP

(_____) _____

Telephone

CURRENT E-MAIL ADDRESS _____

FORMER SCHOOL/COLLEGE ATTENDED: _____

Street/PO Box

City

State

ZIP

COURSE/PROGRAM TAKEN _____

DATES ATTENDED: _____ GRADUATION DATE: _____ # OF COPIES _____

SIGNATURE _____ DATE _____

➤ **NOTE TO THE RECEIVING ORGANIZATION:** PLEASE SEND A COPY OF THIS FORM WITH THE TRANSCRIPT! If a transcript fee is required, please forward this form to the person at the current address above with information concerning the fee. Thank you.

PLEASE MAIL OFFICIAL TRANSCRIPT(S) TO:

ADMISSIONS
SOUTHWEST GEORGIA TECHNICAL COLLEGE
15689 US HIGHWAY 19 NORTH
THOMASVILLE, GA 31792