



410 NW 11th Street, Ste. 112 Grand Prairie, TX 75050

TRANSCRIPT REQUEST FORM

Instructions for processing your transcript request (Please print clearly in blue or black ink):

- ✓ Your transcripts will not be released if there are outstanding obligations to the School.
- ✓ All transcripts are sent by mail or available for pick up
- ✓ A separate request form is required for each address you wish the transcript to be sent.
- ✓ Please allow three (3) business days for your request to be processed.
- ✓ You must have photo identification (driver license or student ID card) when picking up transcript(s) at the counter.

<u>Mail in transcript requests:</u> Mail in your request along with a money order or check for the transcript fee (\$5.00 per copy) made payable to IDTC Career Center, attention Registrar to the address listed above.

<u>Hand delivered transcript requests:</u> Pay the transcript fee (\$5.00 per copy) at the Cashier's Office along with form. Allow three (3) business days for request to be processed.

Student ID number: Number of copies requested:					
Student Name:		Former Names:			
Student Signature:			Request Date	e:	
Date of Birth:	Year Attended:		Phone: ()	
Current Address:					
(Street o	or PO Box)	(City)			(State/Zip)
SPECIAL INSTRUCTIONS:					
☐ Send Transcript☐ For pick up					
SEND TRANSCRIPT TO:					
Office/Person:		_			
College/Organization:					
Address:		_			
City:					
State or Province:					
ZIP or Postal Code:					
For Office Use Only:					
Processed By:	Da	te:	Paymen	t Method:	
Your Transcript is not being re	eleased for the following reaso	n(s) :			
•	ne school, please call the Registra School, please call Students Serv				

Please resubmit your request after you have satisfied your obligation to the School. Thank you.