



REQUEST FOR TRANSCRIPT OF RECORD

(\$5.00 charge per mailed copy, \$12.00 charge per unofficial faxed copy)
(Cash, Check Debit/Credit Card Accepted)
911 South Tenth Street, Tucumcari, NM 88401
(575) 461-4413 – Phone (575) 461-1901 – Fax

PLEASE PRINT

Student Name	_____	SSN	_____
Current Address	_____	Date of Birth	_____
City/State/Zip	_____	Number of Copies	_____
Phone	_____	Date of Request	_____

Applicant is responsible for address

MAIL TO:

_____	Dates attended	_____
_____	Date completed	_____
_____	Student Signature	_____

Send Immediately YES ___ NO ___

Hold for Current Grades YES ___ NO ___

Transcripts issued directly to student or mailed to any entity other than educational institutions, agencies or employers, will be marked "Student Copy"

Other Directions _____