

Transcript Request

5055 Santa Teresa Blvd
Gilroy CA 95020

GAVILAN COLLEGE

Admissions and Records Office

fax 408 846 4940
phone 408 848 4733

Name _____ Soc. Sec. or Gavilan ID # _____

Other Names Used at Gavilan _____ Date of Birth _____

Address _____ Phone _____
Street City State Zip

Approximate Dates of Attendance _____ # of Transcripts Requested _____

Student's Signature _____ Today's Date _____

- IN GENERAL -

The very first two copies are free; each copy thereafter is \$4. Gavilan transcripts are issued only with the student's written authorization. Transcripts from other schools and colleges will not be duplicated. (A transcript is "official" only when it is issued by the institution where the credit was earned).

Mail To:

Name of Person, School or Company

Office, Attention to, etc.

Street

City State Zip

Payment Information:

If you wish to charge the amount due to your MasterCard or Visa, complete the following information:

Card #: _____

Exp. Date: _____

- SPECIAL INSTRUCTIONS -

____ **Transcript needed now.** Requests for rush transcripts can usually be filled in 48 hours but not during late registration periods. There is a \$7 fee for each rush transcript.

____ **Hold transcript for pickup**

____ **Send transcript within 10-12 working days.**

To avoid delays request transcripts well in advance of peak periods such as late registration.

____ **Send transcript after:**

- ____ • Final grades are posted for:
Summer ____ Fall ____ Spring ____
- ____ • Degree is posted
- ____ • Grade change is posted

____ **Certify General Ed requirements for:** ____ CSU ____ IGETC
(\$4. fee, allow 10-12 working days)

Will you be using credit from other colleges? ____

Colleges: _____

Amt Due _____ Amt Pd _____ Prev Copies _____ Request Rcvd _____ Trans. Sent _____