

Bryant & Stratton College Request for Official Transcript

A \$5.00 fee for *each official transcript* must accompany this request. It may take a ***minimum of ten (10) days to a maximum of thirty (30) school days*** from the receipt of payment until your transcript is mailed.

Please **print or type** all information: **School Attended (check one):** USC ____ CCBI ____

Name: _____

ID#: B _____

Or Social Security Number: _____

Address: _____

City: _____

State _____ Zip Code: _____

Date: _____

Telephone: Home:(_____) _____

Cell:(_____) _____

Email address: _____

Date of Birth: _____

I hereby give permission to Bryant & Stratton College to release my transcript to the following (check one):

Myself

Name of Company/School: _____

Attention of: _____

Address: _____

City: _____ State: _____ Zip Code: _____

List all names of student while attending: _____

List all dates attended: _____

List all locations of attended: _____

Did you graduate? _____ Yes _____ No

Program Major: _____

Student's Signature: _____ Date: _____

Mail to:
Transcript Request
Attn: Student Services
Bryant & Stratton College
8687 Carling Road
Liverpool, NY 13090

For Office Use Only

Date Received:		Date Completed:	
Paid Via:		Receipt #:	