



750 Chase Parkway • Waterbury, CT 06708
www.nvcc.commnet.edu

TRANSCRIPT REQUEST FORM

Instructions: Official transcripts are provided directly from the College as requested by the student. Forward this completed form to the Records Office, K516, at the address above or fax to 203-575-8085. If you have been a student at NVCC within the past two years transcript requests can now be made on-line via www.my.commnet.edu **There is no charge for transcripts.**

Student ID # @ _____ **or** **Social Security No.** ____/____/____

Student Name _____
(Last) (First) (Maiden)

Address _____
(Street) (City) (State) (Zip)

check (✓) to update permanent address

Telephone _____ **Date of Birth** ____/____/____

CITIZENSHIP

Are you a United States citizen? __Yes __ No If not, are you a Permanent Resident (*green card holder*) __Yes __No

ETHNICITY and Race

Please provide the following ethnic and race data. This information is requested on a VOLUNTARY basis by the U.S. Department of Education, National Center for Education Statistics. Your answer will not affect admission to or registration in the College.

Ethnicity: Hispanic/Latino Non-Hispanic/Non-Latino Choose not to respond (None)

If you checked Non-Hispanic/Non-Latino above, what is your race?

Please check all that apply:

- White (10) Black or African American (20) Asian (45) American Indian or Alaskan Native (50)
- Native Hawaiian or Other Pacific Islander (80) Other (90) Choose not to respond (60)

College Attended: NVCC MCC WSTC **Dates:** _____

Indicate handling instructions:

- Send transcript now (list recipients on reverse side)
- Hold for current semester grades
- Hold until degree is posted (Grad Date: _____)
- Send **unofficial** copy to student (use address above)
- Send **official** copy to student
Note: Such transcripts are stamped "Issued to Student in a Sealed Envelope" and the envelope bears a similar stamp. Students should be aware that some recipients will not accept transcripts that have not been sent directly to them.

I hereby authorize Naugatuck Valley Community College to release my official transcripts to the recipients named on the reverse side of this form.

Date: ____/____/____ Signature: _____

LIST RECIPIENTS ON REVERSE SIDE

FOR OFFICE USE ONLY

Date Received _____

Date Mailed _____

PLEASE SEND OFFICIAL TRANSCRIPTS TO THE FOLLOWING RECIPIENTS

(PRINT ALL INFORMATION CLEARLY AND COMPLETELY)

Recipient # 1 Institution _____

Address _____

Recipient # 2 Institution _____

Address _____

Recipient # 3 Institution _____

Address _____

Recipient # 4 Institution _____

Address _____
