Office Use Only

| []M []P | Sent | |
|---|----------|--|
| Received: | Recorded | |
| Paid: _Credit _Check _Cash _NA [] form sent to Cashier | Type | |

God's Bible School and College Transcript Request

Instructions available at gbs.edu/transcript. Use separate form for each request.

Identification and Contact Information

| Name (printed): Former or Maiden Name: Social Security No. | (required) | | |
|---|---|-------------------------|--|
| Street and Number: City: | State: | Zip: | |
| Work Telephone: | () Home Telephone: (| _) | |
| Enrollment Information | | | |
| | e: From To In this request held until the end of the term? [] Yes or Academy to the appropriate principal's office.) | [] No | |
| Please release my transcript to | (select one): | | |
| Person or Institution by mail Official transcript mailed directly to the person or institution. | | | |
| Individual/Office: Institution/Address: | | | |
| Myself, sealed | Official transcript is enclosed in a sealed and dated envelope, marked "Official If Delivered Unopened." Use this option if you are to hand-deliver an official copy. | | |
| Myself, unsealed | Transcript is marked "Issued to Student." Most receiving institutions will not consider this to be a | an official transcript. | |
| Email Address | Unofficial transcript emailed as a PDF attachment. | | |

Authorization

Remember to enclose fee of \$5 per transcript.

I hereby authorize God's Bible School and College to release my academic transcript to the person or institution indicated above.

Requestor's Signature (required)