

Bossier Parish Community College

REQUEST FOR OFFICIAL TRANSCRIPT TO BE SENT TO BPCC

A copy of this form must be sent to the registrar's office of each institution previously attended. **Transcripts must be mailed directly from the school in a sealed envelope. Students must request copies of transcripts. Transcripts forwarded to students or marked "Issued to Student" will be rejected.**

Date: _____

TO: REGISTRAR'S OFFICE

Institution

Address

City State Zip

Please send an official copy of my transcript to: **Bossier Parish Community College
6220 East Texas Street
Bossier City, LA 71111**

ATTN: Admissions & Registrar's Office

I attended your institution under the name _____
Print Full Name

My name has changed since I attended your institution. Please send a copy of this form with my official transcript.

My social security number is _____ - _____ - _____.

My date of birth is _____
Month Date Year

I last attended your institution in _____
Semester Year

Sincerely,

Signature

Address

City State Zip

TRANSCRIPTS MUST BE SENT AFTER FINAL GRADES ARE RECORDED.