



Transcript Request Form

There is a \$5.00 fee per transcript requested. Please submit form with payment to the mailing address below.

STUDENT INFORMATION

OCC Student ID # and/or Last 4 Digits of SSN _____ Date of Birth _____

Student Name (last, first) _____

Former Name(s) Used _____

Street Address _____ City _____ State _____ Zip _____

Email Address _____ Phone # _____

TRANSCRIPT INFORMATION AND DELIVERY METHOD(S)

CHECK ONE

Transcript sent to another college, company, or agency

Number of copies _____ x \$5.00 (per copy) = \$ _____

Transcript issued to student to the address indicated above *(will be stamped Issued to Student)*

Number of copies _____ x \$5.00 (per copy) = \$ _____

OTHER INSTRUCTIONS

Check for MTA

Hold for grades for the _____ semester*

Hold for degree *(Grad Application must be submitted prior to request)**

**Processed 3-5 business days after current semester ends*

DELIVERY METHOD

Regular USPS Mail

Expedited USPS Mail: \$35.00 additional charge (1-2 ship with tracking)

TYPE OF TRANSCRIPT

Credit

Continuing Ed/Non-Credit

MAIL TO ADDRESS INDICATED BELOW (Full name and Address; use additional transcript request forms if requesting transcripts for more than one location):

ADDITIONAL INFORMATION

SIGNATURE

Transcripts will not be issued for any student whose financial obligation to Oakland Community College has not been met. I understand that Oakland Community College does not forward transcripts from high schools or from other colleges/universities. Oakland Community College has a strict policy that does not allow transcripts to be sent electronically (fax or email). Please allow **3 to 5 business days** for processing.

Due to the Family Education Rights and Privacy Act (FERPA) of 1974, a student signature is required for release of transcripts.

SIGNATURE _____ DATE _____

Submit request to Enrollment Services by mail (check or money order) to:

Oakland Community College
Attn: Transcripts
Auburn Hills Campus, Building K
2900 Featherstone Road
Auburn Hills, MI 48326-2845

OFFICE USE ONLY

Transcript Fee Paid (Y/N) and Initial _____ ES Date and Processed by _____