

# AUTHORIZATION TO RELEASE TRANSCRIPT



Office of the Registrar  
One College Drive  
Claremont, NH 03743-9707  
(603) 542-7744 / Fax: (603) 543-1844

Complete separate forms for each request if being sent to different recipients. If multiple transcripts to the same recipient, only one release form is necessary. Please print clearly & sign in ink.

PLEASE FORWARD \_\_\_\_\_ TRANSCRIPT(S) TO:  
(# of transcripts)

✓ Please check one

Name/Institution: \_\_\_\_\_

\_\_\_\_\_ Official

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Unofficial

Allow 5-7 working days for processing.

## TRANSCRIPT ACTION:

## ENROLLMENT STATUS AT RIVER VALLEY CC:

### Check one:

- Send transcript immediately
- Student will pick up
- Hold for current semester final grades
- Hold until notation of degree/ award

### Currently enrolled:

Program: \_\_\_\_\_  
Not in program: \_\_\_\_\_

### Former student:

Program: \_\_\_\_\_  
Year graduated: \_\_\_\_\_  
Year withdrew: \_\_\_\_\_  
Not in program: \_\_\_\_\_

Please print your name & address below:

Telephone Number: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

ID#: @ \_\_\_\_\_

Date of Birth (optional): \_\_\_\_\_

If you have attended using another name, print that name here: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FEES: First two transcripts are free. Subsequent transcripts are \$3.00 each.  
Requests for faxed copies will be an additional \$5.00 per transcript.**

## Method of Payment:

- Cash (in person requests only)
- Check attached (payable to "River Valley Community College".)
- Credit Card # \_\_\_\_\_ (Mastercard, Visa, or Discover)  
Expiration Date \_\_\_\_\_ CVV-Code \_\_\_\_\_ (last three digits on back of card)

FOR OFFICE USE ONLY: \_\_\_First Free / \_\_\_Second Free / \_\_\_Fee received (if applicable) / Date processed: \_\_\_\_\_  
(10/21/09)