



**Construction Craft
Training Center**

TRANSCRIPT REQUEST FORM

Last Name: _____ First Name: _____

Date of birth _____ TODAY'S DATE: _____

e-mail address: _____ phone _____

Street address: _____ City: _____ zip: _____

Your transcript will be processed by the following business day of the day we receive your request form. We cannot process a transcript on the same business day.

Please fill out all information above in order for us to expedite your request. A \$10 processing fee will be required with your form. A transcript will not be processed without a request form or the processing fee.

- If you will be picking up your transcript please check here.
- If you would like us to e-mail your transcript check here.
- If you would like your transcript mailed to your home address check here.

