

# MONTEGO BAY COMMUNITY COLLEGE



**For Office Use Only**

- Balance Cleared
- Balance NOT Cleared

Date: \_\_\_\_\_

## REQUEST FOR TRANSCRIPT OF RECORD (PLEASE USE BLOCK CAPITALS)

**Tick Appropriate Box Where Applicable**

First Transcript Request YES ( ) NO ( )      Copies Needed \_\_\_\_\_  
 College Leaving Certificate ( )      Date of Admission \_\_\_\_\_  
 CCCJ Certificate ( )      Date of Graduation \_\_\_\_\_

**N.B.** For students who have completed both an Associate and Bachelor Degree, please indicate if you are requesting both transcripts or only one. The processing fee is charged per transcript.

Associate Degree Transcript Only ( ) Bachelor Degree Transcript Only ( ) Associate and Bachelor Transcript ( )

Official	<input type="checkbox"/>	<b>Resit/Repeat Course(s) Completed</b> <i>(if applicable)</i>	<b>Semester Completed</b>	<b>Lecturer</b>
Unofficial	<input type="checkbox"/>	1. _____	_____	_____
		2. _____	_____	_____
		3. _____	_____	_____
		4. _____	_____	_____
		5. _____	_____	_____

Main Campus Day School ( )      Frome Campus Day School ( )  
 Main Campus Evening ( )      Frome Campus Evening ( )

Programme/Course of Study \_\_\_\_\_

Name While Registered \_\_\_\_\_  
First      Middle      Last

Nationality \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone Nos. \_\_\_\_\_

*If address and telephone numbers are overseas, please state local contact person and phone number:*

\_\_\_\_\_

Signature \_\_\_\_\_ Date of Request \_\_\_\_\_

TRANSCRIPT will be collected by \_\_\_\_\_

TRANSCRIPT SHOULD BE SENT DIRECTLY TO:  
 (Please give details of full address)

Clubs and Societies as listed on Club/Societies Form

*Please note that a transcript is an official document and if tampered with, **will not** be accepted by any institution or organization to which you may apply.*

**Processing time is ten (10) working days. Costs for transcript remain unchanged whether mailed or collected.**

**NB: Transcripts will not be issued for persons in arrears, until settlement is made.**

Montego Bay Community College, Alice Eldemire Drive, P.O. Box 626 # 2, St. James, Tel: 633-7830 Fax: 979-8776