



OFFICIAL TRANSCRIPT FORM

Student Information Services
112 Lamar Drive, Hillsboro, TX 76645
254-659-7600 + Fax 254-582-7591
2112 Mayfield Parkway, Cleburne, TX 76033
817-760-5601 + Fax 817-556-2142
enrollmentinfo@hillcollege.edu

Instructions:

1. Please fill the form out completely.
2. The form **MUST** be signed.
3. The form can be submitted in person, mail, fax or email.
4. There is no charge for transcripts.
5. Transcripts can be sent electronically via SPEEDE to most Texas Colleges/Universities.
6. Transcripts are usually processed within 24-48 hours, but please allow for additional time during registration periods.

Date: _____ Social Security/Student ID: _____

Date of Birth: _____

Last Name: _____ First Name: _____ Middle Name: _____

Other Names You May Have Attended Under: _____

Email Address: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Contact Phone Number: _____ First Term Attended: _____ Last Term Attended: _____

Transcript Sent To:

Are you sending transcripts to more than one address? Yes No

Name of School/Business/Person: _____

Street: _____

City: _____

State: _____

Zip: _____

Number of Transcripts Requested: _____

If requesting transcripts to be sent to more than one address, please attach all addresses to this form.

Special Instructions:

- Hold for Final Grades
- I am a Dual Credit Student needing for another institution or scholarship application
- Hold for Degree Posting
- Hold for Grade Change -- Which Course? _____
- Place in Separate Envelopes
- Send Transcript Electronically via SPEEDE, if available
- Other, Please Explain: _____

For this request to be processed, a signature must be present and all holds to student accounts must be cleared.

Student Signature: _____ Date: _____

If the official transcript is to be picked up by someone other than the student, permission must be given by the student in writing and accompany this form.

For Office Use Only:

Check for Holds: _____ Notified Student: Yes No Processed By: _____ Date: _____