



35109 Royal Place • Soldotna, Alaska 99669 • (907) 260-7422

Transcript Request Form

Student Name: _____

Social Security Number: _____ D.O.B: _____

Mailing Address: _____

Phone Number: _____

Please mail transcripts: Now After current semester I will pick up

I am: currently enrolled at ACC NOT currently enrolled at ACC

of copies: _____ Official Transcript Unofficial Transcript

Mail Transcript to: _____

All prior financial obligations must be met before official transcripts will be released.

To maintain confidentiality, Alaska Christian College does not publish Social Security numbers on written reports, forms, electronic displays or other communications unless required and/or permitted by law (Family Educational Rights and Privacy Act and the Privacy Act of 1974).

Social Security numbers will be printed on ACC transcripts for identification purposes. BY SIGNING THIS REQUEST YOU GIVE YOUR PERMISSION TO INCLUDE YOUR SOCIAL SECURITY NUMBER ON THE TRANSCRIPT. Alaska Christian College, in accordance with FERPA, does not release information without the written request of the student.

Student's Signature: _____ Date: _____

Office use:

Business office OK: _____

Date issued: _____ Sent by: _____