

# Georgia Military College Transcript Request Form

Attn: Registrar's Office  
201 E. Greene St.  
Milledgeville, GA 31061

Fax: 478.445.3378  
Email: transcript@gmc.edu

Student ID/Social Security # \_\_\_\_\_ Birthdate: \_\_\_\_\_

Student: \_\_\_\_\_ *Last*      *First*      *Middle*      *Maiden*

Present Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # (work) \_\_\_\_\_ Phone # (home) \_\_\_\_\_

**Use this information to update my Name and Address. YES \_\_\_\_\_ NO \_\_\_\_\_**

Change processed by: \_\_\_\_\_ Date: \_\_\_\_\_

GMC Campus Attended: \_\_\_\_\_

GMC Dates of Attendance: \_\_\_\_\_

Are you currently a dual - enrolled student? ( ) Y ( ) N

**Mail to students home address ( ) Y ( ) N Number of Copies \_\_\_\_\_**

**If mailing to a school or other address, please complete the following:**

Name of school \_\_\_\_\_

To the Attention of \_\_\_\_\_

Address of School \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**FULL NAME OF SCHOOL ALONG WITH COMPLETE ADDRESS IS REQUIRED FOR ALL REQUESTS. REQUESTS WITH MISSING INFORMATION WILL BE DELAYED IN PROCESSING**

Fax to: \_\_\_\_\_ (Please Include Address Above)

\*\*\*\*All faxes are unofficial; an official is processed and sent through standard mail services on the same day

( ) Hold until current quarter grades are posted. \_\_\_\_\_ Quarter.

( ) Hold for Degree -- Expected Graduation date \_\_\_\_\_

( ) Send as soon as possible

**Transcript fees are as follows:**

( ) No fee for Standard Mail Services

Special Service Fees: (All fees are **NON-REFUNDABLE**)

( ) \$15.00 to FAX unofficial & mail official (Student Must Provide FAX #, Name of Recipient, and Full Address)

( ) \$40.00 for Express Mail Service (Request needs to be received by 2:00 pm or it will go out the following business day)

**\*\*Payment confirmation number: \_\_\_\_\_ (only required for faxes & express mail)**

\*\*\*\*For payment options please log onto [www.gmc.edu](http://www.gmc.edu) and link to Transcript requests under Academics **Or**  
Mail payment to Georgia Military College Registrar's Office 201 E. Greene St. Milledgeville, GA 31061

**Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

Transcripts will not be issued unless all obligations are cleared. Official transcripts of your record from other institutions must be obtained from the institutions issuing the credit. \*\*All requests are destroyed after 6 months.

COLLEGE USE ONLY

Number of copies \_\_\_\_\_ Amount paid: \_\_\_\_\_

RVSD: 10/21/16

Account clear for past or current term \_\_\_\_\_ Initials: \_\_\_\_\_

Student account has balance for upcoming term only \_\_\_\_\_

Student Status: \_\_\_\_\_ Unconditional \_\_\_\_\_ Conditional \_\_\_\_\_ Provisional - **Unofficial**  
only

