REQUEST FOR OFFICIAL HIGH SCHOOL TRANSCRIPT OR GED CERTIFICATE



TO THE STUDENT:

- You will need a personal copy of your transcript for your own use in the program. Please request an additional copy for your records.
- Some schools charge a small processing fee. Please contact the school directly to determine its requirements before mailing this request.
- DO NOT send this form directly to Crossroads College.
- Copy this form if you attended more than one institution.

MAIL THIS FORM TO THE INSTITUTION FROM WHICH THE TRANSCRIPT IS BEING REQUESTED.

PERSONAL INFORMATION			
Name (last, first, middle initial)	Date of Birth	Soc Sec Number	
	Please check one:	☐ High School Graduate, Year:	
Mailing Address		☐ GED Certificate, Year:	
City, State, Zip	Name us	ed when attending this institution or school	
aytime Phone()		•	
,		ots Requested:	
vening Phone ()			
Email	Student	Signature Date	

TO THE REGISTRAR:

OFFICIAL TRANSCRIPT MUST INCLUDE SEAL, SIGNATURE, AND DATE.

Mail one copy to: Crossroads College

Compass Adult Studies Department

920 Mayowood Road SW Rochester, MN 55902-2382

Mail any additional copies to the student's address listed above.