



Records Office
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Ambassador Baptist College

\$8.00

Transcript Request Form

Please fill out as completely as possible. Please print.

Requirements

- Submit an online transcript request form at www.ambassadors.edu/transcript or print, complete, and mail a transcript request form (download from www.ambassadors.edu/transcript).
- Include the transcript fee of \$8.00 per transcript copy with your request.
- Your account must be current with the Business Office.

Personal Information

Legal name: ^{Mr.} _____
^{Mrs.} _____
^{Miss} Last Name First Name Middle Name Maiden Name

Social Security number: ____ - ____ - ____ Birth date: ____ / ____ / ____

Current Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Home phone: (____) _____ Cell phone: (____) _____

Transcript Information

Purpose of transcript

- Employment
- Transfer
- Scholarship
- Other (explain): _____

Name and address of recipient

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Authorization

Student's signature: _____ Date: ____ / ____ / ____

Office Use

Date received: ____ / ____ / ____

Date sent: ____ / ____ / ____

Computer entry: ____ / ____ / ____