



SOUTHWESTERN MICHIGAN COLLEGE

Official College Transcript Request

Instructions:

1. Complete a separate transcript request for each address to which a transcript is to be sent. There is a \$5 charge for each transcript. Incomplete forms or missing payments will not be processed.
2. By mail: Complete the transcript request form below, print, sign, include payment of check or money order, and mail to
Records Office, 58900 Cherry Grove Road, Dowagiac, MI 49047
3. In person: Payment must be made at the Business Office at the Dowagiac or Niles campuses. Complete the transcript form and submit with receipt to Records, 1106 College Services Building, Dowagiac campus or Main Office, Niles Area Campus.

Student ID or Social Security # _____ **Birthdate** _____

Student's Current Name _____
First _____ **M.I.** _____ **Last** _____

Former Last Names (if any) _____

Student's Street Address _____

City _____ **State** _____ **Zip Code** _____

Telephone _____ **Email Address** _____

Approximate Dates of Attendance _____

Student Signature _____ **Date** _____

Delivery Instructions (Please Check One)

- Pick Up** **Mail Now** **Mail after Posting Grades** **Mail after Posting Degree**

Number of Copies _____ **\$5.00 per copy**

Mail Transcript to