

# TRANSCRIPT REQUEST FORM

## Course Work Completed

- Converse Undergraduate Degree
- Converse Masters Degree

(This form MAY NOT be used as a Math Content Refresher Transcript request – see above.)



Office of the Registrar  
580 East Main Street - Spartanburg, SC 29302  
864-596-9095/Fax 864-596-9202

## Office use only

Date Rec'd:

Date Iss'd:

The average processing time for a transcript is 7-10 business days.

**Transcript Fee is \$5.00 per transcript, whether mailed or faxed. (NON-REFUNDABLE)**

Transcripts **will not be issued** for persons whose financial obligations have not been satisfied.

Completed transcript request form with credit card information may also be SCANNED and e-mailed as a PDF attachment to [registrar@converse.edu](mailto:registrar@converse.edu)

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Social Security Number

Date of Birth

LAST NAME

FIRST NAME

MIDDLE/MAIDEN NAME

Please list ALL previous surnames:




Current mailing address:

Home Telephone number (+area code):

Cell Phone number (+area code):

Entrance Date:

Date of last enrollment:

E-mail Address:

Transcript to be processed (check one):

- At end of \_\_\_\_\_ term
- Hold for posting of degree at end of \_\_\_\_\_ term
- AS Soon As Possible

**MAIL /FAX TRANSCRIPT(S) TO: (faxed transcripts are not considered official)**

Transcript #1:

Transcript #2:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason:  Graduate School  Re-Certification  Transferring Schools  Scholarship  Summer School  Other

Signature

Date

**PAYMENT ENCLOSED:**  Check # \_\_\_\_\_  Cash  Visa  Discover  MasterCard  Money Order  American Express  
(Checks made PAYABLE TO: **Converse College**)

Credit Card #:     -     -

Expiration Date: \_\_\_\_\_ Security Code (located on back of card) \_\_\_\_\_