

Transcript Request Form

Complete Transcript Request Form and submit in person to Admissions & Records on any campus or mail with payment to Montgomery College, Germantown Campus Cashier, 20200 Observation Drive, Germantown, MD 20876. If submitted by mail, a check or money order, made payable to Montgomery College, must be included. There is a \$7.00 fee for each transcript copy (credit or non-credit). Transcripts contain Social Security Numbers. Transcripts will not be processed for students with financial holds.

Please allow 5 business days for processing; approximately 7 business days during peak request periods. To check the status of your request, log into **MyMC**, click on **Request MC Transcript**, then **View Status of Transcript Request**. Transcripts submitted in person may be processed immediately (Photo ID required). Please note: The University System of Maryland requests that transcripts are sent directly from Montgomery College.

Student Full Name				
Student ID M-	SSN (voluntary, but useful if l	M-number unknown)		
Former Name(s) (if any)		Birth Date		
Home Address				
Day Phone	Evening Pho	Evening Phone		
Please mail transcript(s) to addition *If being mailed, provide complete.	ress indicated below* OR	ent hand-carrying transcrieto be sent; type or clea		
Name of Institution				
Address				
Address (Continued)				
City		State	ZIP	
Are you requesting a transcript f	rom Maryland College of Art & Desigr	 n*?		
the School of Art and Desigr	custodian of academic records for the Maryland C of Montgomery College on September 1, 2004. It script request using this form only (no online reque	f you attended MCAD prior to S	september 1, 2004,	
Are you requesting a transcript fo	or the UMUC Alliance program? 🗌 Ye	s 🗌 No		
Have you taken Workforce Develor f yes, is this request for your WD	opment & Continuing Education [WD& &CE transcript? Yes No	CE] non-credit courses	s at MC? Yes	
Hold until grades are posted?	Fall ☐ Winter ☐ Spring ☐ Summer	I Summer II		
Hold for pending graduation?	Fall Spring Summer Anticip	ated Graduation Date_		
Number of Transcripts Requeste	d Credit (\$7.00 each)	WD&CE/non-cred	it (\$7.00 each)	
Special Instructions (Indicate if a	tachment is included):			
tudent Signature		Date		
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