Washington County Community College
Calais, Maine
Discover Choices • Create Success

Enrollment & Student Services

One College Drive
Calais, ME 04619
207-454-1013
Instate: 800-210-6932
Fax: 207-454-1018

Transcript Request

Current Last Name: _____ First Name: _____ M.I.: _____

Name at time of attendance: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Cell Phone Number: _____
Cell phone carrier: ☐ US Cellular ☐ Verizon ☐ AT & T ☐ Tracfone ☐ Other _____

Social Security number #: _____ Email address: _____

Date of Birth: _____ Dates of Attendance: _____

☐ Attended Prior to 1988 Number of Transcripts_____

☐ Hold for final grades of current semester ☐ Rush

Student is responsible for providing a complete mailing address (Name/Organization, Person/Department, etc.)

1.

2.

- Transcripts will not be sent if there are any outstanding obligations to the college for any reason. Including defaulted student loans.
- Please allow one week for processing.
- Expedited transcript request (processed within one day of request) is $10.00
- Submit completed form to Donna Geel, Assistant to the Academic Dean

Signature _____Date_____

Office Use Only

Processed: _____ _____
Initials Date