



(541) 888-7352

**SOUTHWESTERN OREGON COMMUNITY COLLEGE  
STUDENT FIRST STOP CENTER**

1988 NEWMARK AVENUE, COOS BAY, OR 97420

www.socc.edu

1-800-962-2838, ext 7352 Fax: (541) 888-1513

***Official Grade Transcript Request Order Form (No Cover Sheet Required)***

Transcripts requested via WebAdvisor will be processed within two (2) business days. Transcripts ordered via mail or fax may take up to seven (7) business days. (During non-peak times)

The first seven (7) transcripts per academic year are free of charge. Additional copies cost \$10 each.

Student's Full Name:	Student ID or SSN:	Date of Birth:
Address:	Phone Number:	Other Names Used:
City, State, Zip:		Years Attended Southwestern:
Currently Attending? Y N	If currently attending, hold request until after grades? Y N	

**Please provide complete addresses including departments; otherwise, your request may be delayed or returned to you. Use WebAdvisor to obtain your unofficial grade transcripts. We do not fax transcripts.**

# of transcripts \_\_\_\_\_ Send my transcripts to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# of transcripts \_\_\_\_\_ Send my transcripts to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# of transcripts \_\_\_\_\_ Send my transcripts to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# of transcripts \_\_\_\_\_ Send my transcripts to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please process and send my requested transcripts to the above addresses. I am aware that transcript requests will only be processed if my account balance is current and if all holds are resolved.

Student's Signature \_\_\_\_\_

Today's Date \_\_\_\_\_

I authorize Southwestern Oregon Community College to charge my credit card \$10 for each transcript requested that exceeds seven (7) per academic year.

Name on Card \_\_\_\_\_ Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Security Code \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_