



Cape Fear Community College

411 North Front Street • Wilmington, North Carolina 28401-3993
Phone (910)362-7000 • Fax (910)362-7080 • <http://cfcc.edu>

TRANSCRIPT REQUEST FORM Adult High School Program

Instructions:

1. Complete and sign transcript request form
2. Enclose a \$2 check or money order payable to Cape Fear Community College
3. Mail to:

Cape Fear Community College
Adult High School Program
411 North Front St.
Wilmington, NC 28401

Note: *A faxed transcript is not "official" and is not accepted as an official document. Official transcripts are mailed or delivered in person. Transcript will not be processed if check or money order is not enclosed.*

DETACH AND MAIL

PLEASE PRINT

Name: _____
(Last) (First) (Middle)

Former/Maiden name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____

Social Security Number: _____ Date of Birth: _____

Enrollment Dates:
(Date Entered) _____ (Last Date Attended) _____

Please check one:

I have applied for admission to _____. Please note my social security number on the official transcript and send the transcript to:

Name of College/University _____

Address _____

City _____ State _____ Zip Code _____

Please send transcript to my mailing address.

In-person pick up

If the transcript cannot be mailed, please notify me as soon as possible.

Applicant's Signature _____ **Date** _____

Completed by: _____

Date: _____