



P.O. Box 1700, Abbotsford, BC V2S 7E7
 Phone (604) 853-7491, Toll Free 1-800-976-8388, FAX (604) 853-8951
 Email: admissions@summitpacific.ca / Website: http://www.summitpacific.ca

Request for Transcript

PLEASE READ THE NOTES ON THE BACK OF THIS FORM.

Student Information

Name: _____
 Address: _____
 City: _____
 Prov / State: _____ Postal Code: _____ Country: _____
 Daytime Telephone: (_____) _____ Email: _____
 Year and Semester of Last Attendance: _____

Urgency:

- | | | |
|--------------------------------------|---|---|
| <input type="checkbox"/> Immediately | <input type="checkbox"/> After Classes Commence | <input type="checkbox"/> After Final Examinations (Approx. 4 weeks after classes end) |
|--------------------------------------|---|---|

I hereby request that Summit Pacific College provide the following institution, organization or individual an official transcript of my studies taken at Summit Pacific College.

Signature: _____

Date: _____

Official Transcript Recipient Information

- I will pick up the transcript(s) on _____ at _____ o'clock.
- Please send Official Transcript(s) to me in sealed envelope(s).
- Please send Official Transcript(s) to the following Institution, Organization or Individual. (If you wish official transcripts sent to more than one recipient, please provide the information on the back of this form or on a separate piece of paper.)

Name: _____
 Attention: _____
 Address: _____
 City: _____
 Prov / State: _____ Postal Code: _____ Country: _____
 Telephone: (_____) _____ Fax: (_____) _____

Fees

	# of copies	
Official Transcript	\$10.00 x _____	\$ _____
Additional Official Transcript	\$1.00 x _____	\$ _____
Please return this form with the total amount enclosed		\$ _____

Cheques should be made payable to Summit Pacific College.

PLEASE READ THE NOTES ON THE BACK OF THIS FORM.

Please charge my credit card:

Visa / MasterCard # _____

Expiry Date: _____ Security Code: _____

Signature: _____

(All credit card information is shredded after processing.)

Note

1. Transcripts will only be released upon presentation of appropriate identification or letter of permission.
2. Transcript requests must be made in writing and include the signature of the student. Requests for Transcripts may be faxed to (604) 853-8951 or mailed.
3. If transcripts are to be sent to more than one institution, please list the additional addresses below or on a separate piece of paper.
4. Transcript requests should be made well in advance of any deadline dates. Normally transcript requests are filled within seven business days.
5. If you are expecting a recent change to be reflected on this transcript, please state the nature of the change. The transcript will not be released until this change is made.
6. "Official transcripts" that are given to students will be in a sealed envelope with "*Contains Official Transcripts*" stamped on the envelope. If someone, other than the intended recipient, opens the envelope the transcripts may not be accepted as being "official".
7. Transcripts will not be issued if the student has any outstanding fees owing to Summit Pacific College.
8. If the amount of payment is in excess of the transcript fee, extra transcripts will be mailed. The office of the Registrar does not issue refunds.