



North Iowa Area Community College

Records Office
500 College Drive • Mason City IA 50401
Ph: 641-422-4376 Fax: 641-422-4150

Transcript Request

PERSONAL INFORMATION *Please Print*

_____			_____
Last Name	First	Middle	Former Name(s)
_____			_____
PO Box/Street Address			Social Security Number or NIACC Student ID
_____			_____
City	State	Zip Code	Birth Date
_____			_____
Daytime Phone _____			
Are you currently enrolled at NIACC? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, dates of attendance _____			

TRANSCRIPT INFORMATION

Mail my transcript(s) to:

Recipient

Institution/Business

Mailing Address

City State Zip Code

Check the statement that applies:

- _____ Send immediately
- _____ Send after final grades for term
- _____ Send after graduation notation

If you need your transcript faxed, please indicate fax number: _____
(Transcripts that are faxed may not be considered as OFFICIAL by the receiving institution.)

SIGNATURE (REQUIRED) I authorize my transcript to be released as indicated above.

Signature Date

- A maximum of five transcripts may be requested at one time. Transcripts of work completed at other schools are not available for redistribution by NIACC.
- Transcripts cannot be emailed.
- Transcripts will not be released if a student has outstanding financial obligations to the college.
- A separate form must be completed for each institution/business.
- Official transcripts must be sent by U.S. mail. Normal processing time is one week.

Note: You can also order transcripts using studentclearinghouse.org if you are currently enrolled or attended fall 2005 or later.

Mail or Fax this completed form to the above address.