

TRANSCRIPT REQUEST

Please send a complete and official transcript to:

BAY MILLS COMMUNITY COLLEGE
Office of Admissions
12214 West Lakeshore Drive
Brimley, MI 49715
(906) 248-3354



To the Student: Please send this completed form to the high school, GED testing site or college from which you graduated/ attended. Contact the high school/test site or College and ask what fee(s) must be paid with this request.

High School/GED Testing Site or College _____

Address _____

City _____ State _____ Zip _____

Student's Name _____
Last First Middle or Former Name

Address _____
Street City State Zip Code

() _____ / / _____ / / _____
Telephone Date of Birth Social Security Number

Dates of enrollment: From _____ To _____

Graduation Date _____ GED Completion Date _____

Degree conferred (if applicable) _____

Student's Signature _____ Date _____

To the High School Guidance Office: Please show the date of graduation and principal or guidance counselor's signature on high school transcript.

To the High School Guidance Office, GED Testing Site or College Registrar:
PLEASE INCLUDE A COPY OF THIS FORM WITH TRANSCRIPT