

TRANSCRIPT REQUEST FORM	PLEASE COMPLETE BELOW
<p>HONOLULU COMMUNITY COLLEGE - RECORDS OFFICE 874 Dillingham Boulevard Honolulu, HI 96817 Ph: (808) 845-9120 Fax: (808) 847-9872</p> <hr/> <p>Print last name, first name, middle initials _____ other name used _____</p> <p>Address: _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Phone Number: (_____) _____ Birth date: _____</p> <p>=====</p> <p><i>HonCC Transcript request is no longer required within the University System. See your Home Institution. Official transcripts of credits earned at other institutions are not available for distributions by HonCC.</i></p> <p>=====</p> <p>SEND TRANSCRIPT TO: (One Transcript Request Form per address)</p> <p>PRINT _____</p> <p>CLEARLY _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>If addressed to Student, do you want it in a sealed envelope to submit to another party? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>All transcripts released to the student will be stamped, "ISSUED TO STUDENT". As these transcripts bear the HonCC seal, they are nonetheless official. It simply advises a third party that the student had personal possession of the "Issued to Student" transcript.</i></p> <p><small>Records (web) rev 12/05</small></p> <p><small>UNDER THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974, THIS INFORMATION IS RELEASED TO YOU ON THE CONDITION THAT YOU WILL NOT PERMIT ANY OTHER PARTY TO HAVE ACCESS TO SUCH INFORMATION WITHOUT THE WRITTEN PERMISSION OF THE STUDENT.</small></p>	<p>No. of request = _____ x \$5.00 (7 working days processing)</p> <p>No. of request = _____ x \$15.00 (RUSH - 24 hours processing)</p> <p>Make check payable to the University Of Hawaii. Enclose the appropriate payment. Additional postage fees are charged for transcript that is sent outside of the U.S.A. Please do NOT send cash.</p> <p>WHEN SHOULD TRANSCRIPTS BE PROCESSED?</p> <p>[] SEND AFTER (specify semester) _____ GRADES POSTED</p> <p>[] SEND AFTER DEGREE IS CONFERRED (allow 8-10 wks after semester ends)</p> <p>[] CHECK THIS BOX IF ENROLLED PRIOR TO AUGUST 1986 AT HONCC</p> <p>[] CURRENTLY ENROLLED AT HONCC</p> <p>[] LAST ATTENDED HONCC _____ SEMESTER _____ YEAR</p> <p>[] ATTENDED APPRENTICESHIP PROGRAM</p> <p>[] MANPOWER TRAINING OFFICE/EMPLOYMENT TRAINING CENTER</p> <p>[] OTHER(specify) _____</p> <p>PURPOSE: _____</p> <p>SOCIAL SECURITY NO. OR BANNER ID: _____</p> <p>SIGNATURE _____ DATE: _____</p> <p>===== OFFICE USE ONLY =====</p> <p>[] ACCOUNT CLEAR _____ BY _____</p> <p>[] TRANSCRIPT FEE PAID \$ _____ BY _____</p> <p>DATE PROCESSED _____ BY _____</p> <p style="text-align: right;"><small>white - RECORDS yellow - STUDENT</small></p>

Important! Transcript Request Form must be signed in order to be processed.

Please call Records Office (808-845-9120) after faxing.