Request for Transcript from a Previous College or University

Please complete and submit this form to your previous college or university to request that an official copy of your transcript be sent to:

Owens Community College Records Office 30335 Oregon Road Perrysburg, OH 43551 (567) 661-2387



Note to student: Please be sure to include your maiden name and married name, if applicable. Please note that a fee may be required when requesting your transcript from your prior college/university.

Note to college/university: In order to complete a student's file, Owens Community College Records Office must have a copy of previous college transcript(s).

| Name | | | | | |
|------------------------|---------|-------|---------------------|----------|--|
| | Last | First | M.I. | Maiden | |
| Address | Charact | | | | |
| | Street | City | State | Zip Code | |
| Social Security Number | | | Phone Number | | |
| Birthdate | | | Dates of Attendance | | |
| Signature | | | Date | | |

Request for High School Transcript

Please complete and submit this form to your high school to request that an official copy of your transcript be sent to:

Owens Community College Student Service Center 30335 Oregon Road Perrysburg, OH 43551 (567) 661-2387



Note to student: Please be sure to include your maiden and married name, if applicable. Please note that a fee may be required when requesting a transcript from your high school.

Note to high school: In order to complete a student's file, Owens Community College Records Office must have a copy of the student's final high school transcript. **Please include graduation date, final grade point average and class rank. TRANSCRIPT MUST BE IN A SEALED HIGH SCHOOL ENVELOPE.**

| Name | Lact | | | | |
|--------------------|---------|-----------|-------|------------|--|
| | Last | First | M.I. | Maiden | |
| Address | Charact | | | | |
| | Street | City | State | Zip Code | |
| Social Security Nu | umber | Birthdate | | | |
| High School | | ACT Score | e | SAT Scores | |
| Date of Graduatio | on | | | | |
| Signature | | Date | | | |

r. 1/2024