High School, GED or College Transcript Request

Students: Send this completed form to your high school, GED testing center or colleges you previously attended to request your transcripts.

Please send a complete and official copy of my transcript to:

Schoolcraft College
Admissions and Enrollment Center
18600 Haggerty Road
Livonia, MI 48152-2696

From: _____

Student's Last Name   First   Middle   Former Name

_____

Mailing Address   Street   City   State   Zip + 4 digit code

(_____)_____   _____/_____/_____   ____ ____ ____ ____

Day Phone   Date of Birth   Social Security Number (last 4 digits)

Date of last enrollment or graduation/GED test date:_____

Student's Signature _____   Date _____