

TRANSCRIPT REQUEST Form

For requesting high school or college transcripts be sent to Gateway Technical College

Name:			ID/SS#:
Name under which you attended:			Date of Birth:
Address:			
City:	State:	Zip:	
Home Phone #: ()		Work Phone #: ()	
Name of Educational Institution I am requesting my transcripts from:			
Address:			
Address:			
City:	State:	Zip:	
Last Date of Attendance:	Enclosed transcript fee: \$		
	Check with issuing school for possible transcript fee.		
I have applied to Gateway Technical College:			
() Places forward a convert my college transcript to Cataway			
() Please forward a copy of my college transcript to Gateway.() Please forward a copy of my high school transcript to Gateway.			
() Please forward a copy of my GED or HSED transcript with PASS/FAIL date to			
Gateway.			
() Please forward a copy of my placement test scores to Gateway.			
() I lease forward a copy of my placement test scores to Gateway.			
Signature of Student (or parent or guardian if minor)			Date

Transcripts are considered "official" when they are sent directly to Gateway Technical College from the issuing school. Transcripts may be delivered by the student if the transcripts remain unopened in the issuing school's sealed envelope. All official transcripts **must** have the issuing school's raised seal and/or appropriate official's signatures to be accepted.

Please have all official transcripts for the above-named individual mailed directly to:

Student Services
Gateway Technical College
400 County Rd. H
Elkhorn, WI 53121

Please attach this form with the official transcript