



**Cambridge College**  
Office of the Registrar

**Transcript Request Form**

Cambridge College - 1000 Massachusetts Avenue - Cambridge, MA 02138 - (800) 877-4723

(617) 873-0101

Fax - (617) 349-3560

[www.cambridgecollege.edu](http://www.cambridgecollege.edu)

Please Print and complete form

Student ID# \_\_\_\_\_  
US SS# \_\_\_\_/\_\_\_\_/\_\_\_\_

**Student Request**

Name \_\_\_\_\_ Former Name \_\_\_\_\_  
First/ MI/ Last

Contact Telephone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Home/ Cellular Graduated  Yes YR \_\_\_\_  No YR \_\_\_\_  
(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Ext. \_\_\_\_ Dates of Enrollment: From \_\_\_\_ To \_\_\_\_

**Transcripts cannot be processed if student has an Admissions or Business hold**

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Transcript Retrieval Information**

**IF YOU HAVE MORE THAN ONE DEGREE FROM CAMBRIDGE COLLEGE, PLEASE INDICATE WHICH TRANSCRIPTS YOU WANT. EACH DEGREE REQUIRES A SEPARATE TRANSCRIPT.**

Type of Transcript:  BA  M.Ed.  CAGS  MM  Special Student  EdD

**\$ 5.00/ each Official Transcript to be forwarded to:**

\_\_\_\_ # of copies

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ # Of copies

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\$ 2.00/ each Unofficial Transcript to be forwarded**

\_\_\_\_ # of copies

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ # Of copies

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**In order to initiate your transcript you must complete the following Method of Payment**

VISA  MASTER Card Credit# \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Cash  Check/ Money Order Payable to Cambridge College

**Business Clearance** \_\_\_\_\_  
**Balanced Due \$** \_\_\_\_\_  
**Refund Due \$** \_\_\_\_\_