Three Rivers Community College
Attn: Transcripts
Registrar’s Office – Rm A115
574 New London Turnpike
Norwich, CT 06360

Phone: (860)215-9064
Fax: (860)215-9919
email: registrar@threerivers.edu

Transcript Request Form
There is no fee to process a transcript request

Student ID# or Last 4 of Social Security# Date of Birth

Student’s Name

Current Address

City State Zip

(_______)_______-_______

Telephone#

Previous Name

Dates of Attendance:

☐ Currently attending
☐ Previously attended

(approximate date(s) if actual unknown)

Graduated: No ☐ Yes ☐ Year _________

(approximate year if actual unknown)

Send to: (print receiver’s name and address below or self on the name line if you are the receiver)

☐ Self – Official transcripts must remain in a sealed envelope and are not to be opened by student.

☐ Person or Institution – indicated below

☐ Official - Number of Copies _______

☐ Unofficial - Number of Copies _______

(available online for current students)

☐ Send Now

☐ Send after grades are posted

City State Zip

Address

Address

With my signature, I authorize Three Rivers CC to release copies of my academic record to the person or institution indicated above with the understanding that the named recipient will not release the record to a third party without my written consent.

Student’s Signature _____________________________ Date _____________________________

Allow approximately 2 to 5 working days for processing. Beginning and ending of semester may cause delay.

Note: transcripts are not faxed

08/04/16vw