
Today's Date

Name of Educational Institution

Address

City State Zip

Dear Sir or Madam:

Please forward official transcripts for _____
print students full name

SSAN/SID: _____. Dates of attendance from _____ to _____

To the following school:

GLENDALE COMMUNITY COLLEGE
Admissions & Records
Transcripts Evaluation
6000 West Olive Avenue
Glendale Arizona 85302-3090

If there are fees incurred I have included the amount of _____. Please let me know there are additional charges. My current address and telephone number is:

name

address

city state zip

telephone number

Thank you,

students signature