



## INDIAN RIVER STATE COLLEGE

### REQUEST FOR TRANSCRIPT TO BE SENT TO INDIAN RIVER STATE COLLEGE

**STUDENT:** After completing this form, email or send to your high school and Registrar of all prior colleges. Fees for transcript requests are the responsibility of the student. Official sealed transcripts must be submitted to the IRSC Office of Admissions and Records.

**SCHOOL:** Please attach this form to the official transcript.

PLEASE SEND MY TRANSCRIPT TO: Indian River State College  
Office of Admissions & Records  
3209 Virginia Avenue  
Fort Pierce, FL 34981-5596

Permission is hereby given for the release of my transcript to IRSC.

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle name \_\_\_\_\_

Previous Name(s) \_\_\_\_\_

Date of Birth \_\_\_\_\_  
(month/date/year)

Current Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Dates of Attendance \_\_\_\_\_ to \_\_\_\_\_  
(month/year) to (month/year)

Date of Graduation (if applicable) \_\_\_\_\_  
(month/year)

Student Signature \_\_\_\_\_