

New Geneva Theological Seminary

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Transcript Request

Please print or type the following information and return this form to the Registrar's Office.

Name of Student: _____ *Date:* _____

Mailing Address: _____

City _____ *State* _____ *Zip* _____

Telephone: () _____

- Please send me an **unofficial student copy** of my New Geneva Theological Seminary transcript to the address provided above. (I understand there is no fee for an unofficial student copy of my transcript.)

- Please send an **official copy** of my New Geneva Theological Seminary transcript to the address (es) provided below. (I have enclosed a \$5.00 check or money order in U.S. funds for each official transcript I have requested.)

Name of Institution: _____

Mailing Address: _____

City _____ *State* _____ *Zip* _____

Name of Institution: _____

Mailing Address: _____

City _____ *State* _____ *Zip* _____

Signature of Student: _____

Required for release of any transcript