

# Hesston College

**START HERE, GO EVERYWHERE**

*Transcript Request Form*  
(see information about Academic Transcripts at  
[www.hesston.edu/academics/registrar/request-a-transcript/](http://www.hesston.edu/academics/registrar/request-a-transcript/))

Complete this form and mail or fax it to:

Hesston College Registrar  
Box 3000  
Hesston, KS 67062  
Fax: 620-327-8300

Student's Full Name: \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Name used at Hesston (if different from above): \_\_\_\_\_

Social Security Number (or student number or date of birth): \_\_\_\_\_

Dates of attendance at Hesston College: \_\_\_\_\_

Current mailing address: \_\_\_\_\_  
\_\_\_\_\_

Student's signature: \_\_\_\_\_

Payment:

- Cash, check or money order enclosed. Amount: \_\_\_\_\_  
 Cash, check or money order will follow in the mail.  
 Charge to credit card (circle one):    Visa    MasterCard    Discover    American Express

Name \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ / \_\_\_\_\_

If the transcript is to be sent to your home address, please check one of the following:

- It is an unofficial copy for my own use.  
 It must be an official copy that I can present unopened to an agency, employer or another school.

Complete address(es) to which the transcript should be sent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_