

## Transcript Request

I have applied for admissions to Wilson Community College. Please forward my official transcript to:

**Admissions Office**  
**Wilson Community College**  
**PO Box 4305**  
**Wilson, NC 27893-0305**

School attended: \_\_\_\_\_

Dates attended: \_\_\_\_\_

Name as it should appear on your records: \_\_\_\_\_

I certify that you may release my educational records to Wilson Community College

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Signature Required

My current mailing address: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_