



# MARTIN COMMUNITY COLLEGE

**CURRICULUM TRANSCRIPT AND PLACEMENT TEST SCORE RELEASE FORM**  
**\$2 FOR EACH OFFICIAL TRANSCRIPT. THERE IS NO CHARGE FOR PLACEMENT TEST SCORES.**

**Your transcript payment may be submitted by mail or by phone.**

**BY MAIL:**

Mail this request form and payment to:

Martin Community College  
Attn: Registrar's Office  
1161 Kehukee Park Road  
Williamston, NC 27892

Make check or money order payable to:  
Martin Community College.

**BY PHONE/FAX/EMAIL:**

If you have a debit or credit card, the Business Office Cashier can accept your information over the phone. Please call (252)789-0221.

Fax or scan and email this form to the Registrar's Office.

Fax: (252) 789-0311

Email: registrar.office@martincc.edu

**Instructions:** Print and complete this form. Please allow 24-48 hours processing time.

**Student Name:** \_\_\_\_\_

**Former Name:** \_\_\_\_\_

*(As it appears on your MCC Transcript if different from above)*

**Date of Birth:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

*(mm/dd/yyyy)*

**Current Address:** \_\_\_\_\_

**Student Signature (required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

Choose preferred options:

**Send Transcript**  **Send Placement Test Score Report**  **Send Both**

*Provide the month/year placement test was taken \_\_\_\_/\_\_\_\_*

**Send Now**  **Send After**  **Spring Semesters** **I will pick-up transcript**

**Summer Semester**

**Fall Semester**

Send the requested materials to *(provide complete mailing address):*

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

*(for additional destinations, please list on the back of this form)*

*Office Use Only*

**Receive Date:** \_\_\_\_\_ **Payment Received**  **Process Date:** \_\_\_\_\_ **Mail Date:** \_\_\_\_\_