



# NEW YORK CITY COLLEGE OF TECHNOLOGY

Office of the Registrar  
300 Jay Street, Brooklyn, NY 11201  
Telephone (718) 260-5800

## Transcript Request Form

**Instructions:**

1. Fill out the form clearly and completely.
2. Go to the Bursar's Office (NG-06) to pay the fee of \$7.00. (There is no charge if sent to another CUNY school.)
3. Drop off the form at the Registrar's office (NG015)

**REQUIRED INFORMATION:** *All information must be noted as it appears on the records of the College.*

CUNYfirst ID Number: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email: \_\_\_\_\_

Dates attended From: \_\_\_\_\_ To: \_\_\_\_\_ Degree award: \_\_\_\_\_

Major : \_\_\_\_\_

<p><b>MAIL TRANSCRIPT TO THE INSTITUTION BELOW:</b></p> <p>Name: _____</p> <p>Address: _____ Apt. #: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Attention of: _____ (Name of person or office is required)</p>	<p>Number of copies: _____</p> <p><input type="checkbox"/> Include courses in progress</p> <p><input type="checkbox"/> Hold for final grades</p> <p><input type="checkbox"/> Hold for degree awarded</p>
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Please allow 5-7 business days to process for mail delivery. During peak periods, additional time may be required.

<p>_____ Signature (STUDENT)</p>	<p>_____ Date</p>
<p>_____ Signature (Registrar's Office use only)</p>	<p>_____ Date</p>