



Transcript Request Form
 Mail or Fax to:
 Riverland Community College
 Registrar's Office
 Attn: Linda Wasmoen
 2200 Riverland Drive
 Albert Lea MN 56007
 TEL: 507-379-3323 FAX: 507-379-3333

STUDENT INFORMATION: *Please Print Clearly*

\$3.00 fee per transcript
 Check or money order payable to Riverland
 or VISA or Mastercard*
 (Please do not send cash)

Student ID or Social Security #		Birth Date	
Name (Last, First, Middle)		Former Name(s)	
Address		City	State Zip
Email Address		Telephone number	
Signature	Date	Cell phone number	

Riverland is asking you to provide information that includes private and/or confidential information under state and federal law. Riverland is asking for this information in order to process this form. You are not legally required to provide the information we are requesting; however, the college may not be able to effectively process this form without it.

Please check all categories that apply:

- Currently Enrolled at Riverland
- Attended After 1991
- Attended Before 1991 Albert Lea Vocational Austin Jr. College Austin Vocational

Approximate dates of attendance: _____

Specific Directions for Transcripts:

- Official copy Student (unofficial) copy
- Send Immediately
- Send after: FALL SPRING SUMMER I SUMMER II
- Hold until degree is recorded

OFFICE USE:
Amount Paid: \$ _____ Initials: _____

SEND TRANSCRIPT TO: (Your transcript cannot be faxed)

*** CREDIT CARD PAYMENT INFORMATION**

<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD
Card Number	
Expiration Date	

Your credit card information will be shredded after processing.