

Hinds Community College

Office of Admissions and Records P.O. Box 1100, Raymond, Mississippi 39154

Phone: 601.857.3212 | Fax: 601.857.3539 | Email: records@hindscc.edu

Transcript Request Form

Please complete this form in its entirety. All lines MUST be completed or your request will be returned.

(PLEASE PRINT PLAINLY)

(PLEASE	PRINT PLAINLY)		
Last campus attended?	NAHC Rankin Ra		_
Student Name.	Former or Malueli Name(5)	
Birth Date:/ Student ID #:	OR Last 4 digits of Se	ocial Security N	lumber:
Address:			
Street	Apt#	City	State Zip Code
Were you enrolled prior to Fall 1982? Yes No	Contact Number:		
Are you currently enrolled? Yes No If not,	last semester attended?		
Pick up today How many? Pick	up at	campus	How many?
Please send my transcript to:			
Desirient Name (a mail address if an electronic conv. is to be	a cont):		
Recipient Name (e-mail address if an electronic copy is to be	e sent):		
Address:	City:	State:	Zip:
Please use the address above as my permanent mailing	address for Hinds		
Number of copies to send to the above address:			
Notes:			
• The processing time is 24 - 48 hours.			
We do not fax transcripts.		_	
 If your transcript needs to be sent after grade request at https://www.hindscc.edu/admission 	-	d, you must si	ıbmit an online
I understand that, pursuant to rights contained in the Family to the above institution or individual will not be released to an			
I have been given the opportunity to challenge the contents of n misleading or otherwise in violation of my privacy or other deletion of any such inaccurate, misleading or otherwise inappears.	rights and have been provide	ed an opportunii	

PLEASE READ CAREFULLY

- All financial obligations to the College and admission requirements must be cleared before transcripts can be issued.
- Transcripts sent to this office for our files CANNOT BE COPIED or RELEASED. You must contact the issuing institution for copies.
- Student records are confidential and transcripts are issued only by a written request that has been signed by the student.

X Signature D	Oate
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Notice of Non-discrimination Statement

In compliance with Title VI of the Civil Rights Act of 1964, Title IX, Education Amendments of 1972 of the Higher Education Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 and other applicable Federal and State Acts, Hinds Community College offers equal education and employment opportunities and does not discriminate on the basis of race, color, national origin, religion, sex, age, disability or veteran status in its educational programs and activities. The following have been designated to handle inquiries regarding these policies: **EEOC Compliance:** Sherry Bellmon, Vice President of Instruction/Career & Technical Education, Box 1003, Utica, MS 39175; Phone: 601-885-7002 or Email: <u>EEOC@hindscc.edu</u>. **Title IX:** DeAndre House, Associate Vice President Student Services, Title IX Coordinator, Box 1100 Raymond MS 39154; Phone: 601-857-3353 or Email: <u>TitleIX@hindscc.edu</u>.