

BARTON COMMUNITY COLLEGE
Academic Transcript Request

Address inquires to: Barton County Campus
Office of Enrollment Services
245 NE 30th Road
Great Bend, KS 67530
(620) 792-9252 or (800) 748-7594
FAX: (620) 786-1175

Date of Request: _____

- _____ No. of transcripts requested
- _____ Send Now; do not hold for semester grades
- _____ Hold for current semester grades
- _____ Hold for degree

Fort Riley Campus
PO Box 2463, Bldg. 211
Fort Riley, KS 66442
(877) 620-6606
FAX: (785) 784-7542

Name: _____
Last First MI Maiden/Other Names

Barton College ID/SSN: _____ Date of Birth: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Telephone Number: _____ Email Address: _____

Transcripts are released ONLY by request signed by the student.

Student Signature

FEE for each Transcript: \$8.00 for Mail or FAX

Requests will be withheld from any student with a financial hold on their account. The appropriate fee must accompany any request or the request will not be processed.

Send my academic transcript to the following address:

Issued to: _____

Attention: _____

Address: _____

City: _____ State: _____ Zip: _____

Transcripts will be issued within 48 hours upon receipt. Please allow at least two weeks at the end of the term or during peak enrollment.

Printed and mailed transcripts are processed during office working hours only. Transcripts can be requested electronically at www.bartonccc.edu (Send a Transcript option) with no delays in processing.

Transcripts will not be processed until payment is received

Payment Information:

Payment Enclosed – Check/Cash/Money Order

Or

Credit Card Information:

Card Type _____ Card # _____ Exp. Date _____ Authorization code : _____

Name on card _____ Zip Code for Card Holder: _____