

Registrar's Office

P: 603-230-4014

F: 603-230-9314

NHTIRegistrar@ccsnh.edu

Transcript Request Form

Use this form if you attended before 1991 – Paper transcripts only All others order through the National Student Clearinghouse:

<https://tsorder.studentclearinghouse.org/school/ficecode/00258100>

Current name

First Middle Last

Last name during attendance

Date of birth

NHTI student ID or last 4 of SS#

Phone #

Current address

City State ZIP

Email address

Attendance period (estimate)

A \$5.00 per transcript fee is due before transcript can be processed. Please allow up to 2 weeks for your transcript to arrive at the destination.

Transcript action:

- Process transcript now
- Hold processing for final posting of current semester grades
- Hold processing until degree is awarded

of transcripts requested _____

Issue transcript to:

Name/institute

Attention

Address

Student signature

Date

Payment information:

Please call the Registrar with credit card information: 603-230-4014

Total cash payment

Total check payment

Check #

Updated 0-24