

Transcript Request Form

Upon receipt of completed Request Form, a minimum of 1-2 business days is required to process the request. PEAK times may take longer.
(Allow extra time for transit by mail)

Student Information:

Name: _____
ID: _____ Date: _____
Previous Name: _____
Birth Date: _____ Telephone: _____
Address: _____

Dates of Attendance: _____
Campus Attended: _____ MT Tech _____ COT/Vo-Tech

SIGNATURE

Signature is required before transcript is released. Transcripts are not released if a student has an unpaid debt to the University, including parking fines. Please call (406) 496-4250 to see if you have an outstanding balance with the college.

Number of Copies: _____ Official - (on security paper) \$3.00
 Needed at Completion of Semester Unofficial - (on white paper) \$3.00
 Overnight – Additional Charge** Faxed - \$6.00

Payment needs to be made to the Business Office prior to the request being processed.
Contact the Business Office at 496-4250 for payment and record the receipt number here.

Business Office Receipt # _____

Office Use: Processed by: _____ Date: _____

*Send To:

Name: _____
Company Name: _____
Address: _____
City, State, Zip: _____
Fax Number: _____

Name: _____
Company Name: _____
Address: _____
City, State, Zip: _____
Fax Number: _____

Name: _____
Company Name: _____
Address: _____
City, State, Zip: _____
Fax Number: _____

*Addresses are required for all requests being mailed out.
Incomplete forms will not be processed and a new request, including charges, will have to be placed.

** Call the Enrollment Services Office at 496-4256 to arrange payment for overnight shipments.