

Diploma/Transcript Request

Please print this page, including your personal information and mail to Big Bend Community College, 7662 Chanute Street NE, Moses Lake, WA 98837-3299 or FAX your request to (509) 762-6243

Student ID Number or Social Security Number _____

Name _____

Address _____

Phone _____

Email _____

Send to _____

Send to _____

Choose one of the following:

Send now

Send after current grades are posted

Send after degree posted

Send after grade change/incomplete removal for course _____

Year last attended class _____

Attended in: Moses Lake Europe

Classes were High School Completion College

I am requesting a Transcript - no charge Duplicate Diploma - \$10

Number of copies requested _____

Signature _____ Date _____

Remember to include payment for diploma requests. Checks should be made payable to BBCC and must be included with your request. Major credit cards: Visa, MasterCard and Discover may be used. Include your card number, expiration date and your name as it appears on the card.

Credit Card Number _____ Expiration Date ____/____

Name on card _____

Signature _____