



**COMPLETE THIS FORM ONLY IF YOU ARE REQUESTING YOUR  
DYERSBURG STATE COMMUNITY COLLEGE TRANSCRIPT**

Please complete all information and FAX completed form to 731/286-3325 or mail to:  
Dyersburg State Community College  
Office of Admissions and Records  
1510 Lake Road  
Dyersburg, TN 38024

- DSCC transcripts will be issued free-of-charge for up to six copies per term. A fee of \$1.00 will be assessed for each additional transcript.
- DSCC Transcripts will not be issued until all debts or obligations to DSCC have been satisfied.
- Due to the costs involved, DSCC does not fax transcripts.

**Name and Date of Birth:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Former Name(s): \_\_\_\_\_

Birth Date: MM: \_\_\_\_\_ DD: \_\_\_\_\_ YY: \_\_\_\_\_

**Contact Information:**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

DSCC ID # \_\_\_\_\_ OR Last 4 Digits of SSN: \_\_\_\_\_

Are you currently enrolled at DSCC? \_\_\_\_\_ Number of transcripts requested: \_\_\_\_\_

**Check all of the following that apply to your request:**

\_\_\_\_\_ *Mail my DSCC transcript to me at the address listed above.*

\_\_\_\_\_ **Mail my DSCC transcript to the address listed below.**

\_\_\_\_\_ *I will pick up my DSCC transcript at the DSCC One Stop Center on the Dyersburg Campus. [Allow 3-5 days for processing.]*

\_\_\_\_\_ **Do not mail my DSCC transcript until the current term's grades are posted.**

\_\_\_\_\_ *Do not mail my DSCC transcript until my degree is posted at end of term.*

**Mail my DSCC Transcript to Name/Address:**

Individual's Name or Specific Office (if applicable): \_\_\_\_\_

Business or Institution: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Individual's Name or Specific Office: \_\_\_\_\_

Business or Institution: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Signature (Required)** \_\_\_\_\_ **Date** \_\_\_\_\_