



EL PASO COMMUNITY COLLEGE
 Continuing Education Registrar Office
 ASC B330 - (915)831-7737

Date received by CE Registrar's Office

STUDENT TRANSCRIPT REQUEST/LETTER OF VERIFICATION REQUEST

TRANSCRIPT: _____ LETTER OF VERIFICATION: _____ BOTH: _____ NUMBER OF COPIES: _____

PLEASE PRINT STUDENT INFORMATION BELOW:

STUDENT NAME: _____ DOB: _____ STUDENT ID/SS: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

OTHER NAMES YOU USED WHILE ATTENDING EPCC: _____

LAST DATE OF ATTENDANCE: _____

MAIL TO	TO _____ ADDRESS _____ CITY/STATE _____ ZIP CODE _____
MAIL 2ND COPY TO	TO _____ ADDRESS _____ CITY/STATE _____ ZIP CODE _____
MAIL 3RD COPY TO	TO _____ ADDRESS _____ CITY/STATE _____ ZIP CODE _____

PLEASE NOTE:
 Student MUST be CURRENTLY ENROLLED for Letter of Verification.
 Student MUST present a picture ID at the time of request AND for pick up for Transcripts or Letter(s) of Verification.
 Continuing Education office will NOT release Transcripts or Letter of Verification if the student has a Business Hold.

STUDENT SIGNATURE: _____ DATE: _____

PROCESSED BY CE REGISTRAR STAFF: _____ DATE: _____

El Paso County Community College District does not discriminate on the basis of race, color, national origin, religion, gender, age, disability, veteran status, sexual orientation, or gender identity.