



LIFE CHRISTIAN UNIVERSITY

TRANSCRIPT REQUEST

1. EDUCATIONAL INSTITUTION ATTENDED				2. SEND TRANSCRIPT TO:				
NAME OF INSTITUTION			LAST NAME		FIRST NAME		MI	
ADDRESS			ADDRESS					
CITY			CITY					
STATE / PROVINCE		POSTAL CODE	COUNTRY		STATE / PROVINCE		POSTAL CODE	COUNTRY
3. STUDENT INFORMATION				TO THE APPLICANT				
LAST NAME		FIRST NAME		MI		<p>NO COLLEGE CREDIT CAN BE AWARDED FOR CLASSES YOU HAVE ATTENDED AT LCU WITHOUT PROOF OF PREVIOUS COLLEGE ATTENDANCE, HIGH SCHOOL GRADUATION, OR A G.E.D.</p> <p>SEND A COPY OF THIS FORM TO EACH COLLEGE YOU HAVE ATTENDED TO OBTAIN YOUR OFFICIAL SEALED TRANSCRIPT. TRANSCRIPTS SHOULD BE SENT TO YOU PERSONALLY. MOST COLLEGES CHARGE A SMALL FEE FOR TRANSCRIPTS, SO A CHECK FOR THE FEE AMOUNT SHOULD ACCOMPANY YOUR REQUEST. REQUEST YOUR TRANSCRIPTS AS SOON AS POSSIBLE, AS LCU NEEDS YOUR OFFICIAL TRANSCRIPT WITHIN 60 DAYS OF YOUR APPLICATION. IF YOU HAVE NOT ATTENDED AN ACCREDITED COLLEGE AND DO NOT HAVE A PHOTOCOPY OF YOUR HIGH SCHOOL DIPLOMA, COMPLETE THIS FORM AND SEND IT TO YOUR HIGH SCHOOL GUIDANCE OFFICE.</p>		
MAIDEN NAME (IF APPLICABLE)		YEARS ATTENDED	BIRTHDATE (MM / DD / YYYY)					
PRESENT ADDRESS		CITY						
STATE / PROVINCE		POSTAL CODE	COUNTRY					
STUDENT SIGNATURE			DATE					