

# Northwest College of Art Transcript Request

There is a \$5.00 fee for each transcript requested. Please complete the following information and submit this form to:

Registrar  
Northwest College of Art  
16301 Creative Drive NE  
Poulsbo WA 98370

Forms without an original signature and transcript fee will not be processed. Please allow 1-2 weeks for transcripts to arrive.

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Year(s) you attended NCA \_\_\_\_\_ Graduation date (mo/yr) \_\_\_\_\_

# of transcripts needed \_\_\_\_\_ (\$5.00 per transcript)

Transcript(s) sent to:

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Reason for request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I authorize Northwest College of Art to mail transcripts to the above individual / school.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Office use only** \*\*\*\*\*

Date received \_\_\_\_\_ Date mailed \_\_\_\_\_

Registrar's Signature \_\_\_\_\_