

**TRANSCRIPT REQUEST**

Prospective Student: Mail directly to the institution you are requesting your transcript from. Please check with you institution for transcript fees before making your request. Make copies as needed.

**TYPE OF TRANSCRIPT:**

\_\_\_\_\_ HIGH SCHOOL: GRADUATION YEAR \_\_\_\_\_

Transcript must include: GPA and Graduation Date.

\_\_\_\_\_ GED EQUIVALENCY: YEAR \_\_\_\_\_

\_\_\_\_\_ COLLEGE/UNIVERSITY TRANSCRIPT

PLEASE SEND MY OFFICIAL TRANSCRIPT DIRECTLY TO:  
  
**CSIMT – Admissions**  
**3185 Wylie Ridge Road**  
**Weirton, WV 26062**

\_\_\_\_\_  
Name Date of Birth

\_\_\_\_\_  
Address Social Security Number

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Dates of Last Attendance

\_\_\_\_\_  
Name at the Time of Attendance

\_\_\_\_\_  
Student's Signature