

**BETHEL**  **College**  
*Cultivate the Call*

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**REQUEST FOR STUDENT TRANSCRIPT**

TO: Registrar

FROM: \_\_\_\_\_  
My Name (printed)

I request that an official transcript be sent to the following institution:

\_\_\_\_\_  
Name of Institution

\_\_\_\_\_  
Address of Institution

\_\_\_\_\_  
Dates attended Bethel Bible Institute or Bethel College

Please check one:       First request (no charge)       Second Request (\$5 fee)

Circle one:      Visa      MasterCard      AmEx      Discover

\_\_\_\_\_  
Card #      Ex.      3 digit security code

My contact information is:

\_\_\_\_\_  
Address      City/State/Zip

\_\_\_\_\_  
Home/Cell Phone      Work Phone

\_\_\_\_\_  
Signature      Date

You can mail the form to Bethel College, 1705 Todds Lane, Hampton, VA 23666 or  
fax it to 757.826.5436