Request for Records
Adult Basic Education

☐ GED Results ☐ High School Transcript ☐ Enrollment Verification

College of the Desert, 43500 Monterey Ave Palm Desert, CA 92260
Phone (760) 776-7348 Fax (760) 773-2505

STUDENT INFORMATION

NAME:_____ SSN:_____
LAST FIRST MI

OTHER NAMES USED:_____ BIRTH DATE:_____

ADDRESS:_____ TELEPHONE:_____

_____ EMAIL:_____

DELIVERY INSTRUCTIONS (Choose ONE)

☐ Student Pick Up

☐ Mail to: _____

☐ I authorize _____ _____
to pick up my transcripts and understand that they will be required to provide a picture ID.

STUDENT NOTIFICATION

1. Student is responsible for providing correct addresses.
2. Transcripts include only courses taken at College of the Desert (Copper Mountain courses completed through May 2001).
3. Transcripts will not be sent if student has an outstanding financial obligation or other hold on their records.
4. Allow 21 business days for processing. Allow 4 weeks for final grades and 6 weeks for degrees to be posted.
5. Picture ID is required to pick up transcripts in person.
6. Transcript requests being sent by fax must attach a picture ID to request.
6. You will receive an email when your transcripts have been processed.

Student Signature_____ Date_____