



THE COLLEGE OF THE BAHAMAS  
RECORDS DEPARTMENT

TRANSCRIPT REQUEST FORM

Attn: Transcripts

P.O. Box N-4912  
Telephone: (242) 302-4360  
(242) 302-4312  
Fax: (242) 302-4395  
Email: records@cob.edu.bs

Please read carefully. Fill out completely, pay at Business Office, and return the white copy to the Records Department

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Maiden Name \_\_\_\_\_

Student ID# \_\_\_\_\_ Birthday (mm/dd/yyyy) \_\_\_\_\_ Phone Contacts \_\_\_\_\_

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

Email Address \_\_\_\_\_

Are you currently enrolled at COB?  Yes  No Previous institution— SSTC, BTC, CRW, BHTC (Please circle)  
If not currently enrolled, last semester of enrollment? \_\_\_\_\_ Year Graduated (if applicable) \_\_\_\_\_

TYPE OF TRANSCRIPT  Unofficial  Official

Please indicate where you want the transcript sent:

Send now  Hold for current semester grades  Hold until degree date is reflected  Hold for grade change  
 Other instructions \_\_\_\_\_

Where and to whom will the transcript(s) be sent:

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Transcripts are sent by regular mail unless otherwise requested.

Additional fee(s) apply for the following services.

Courier Services (NOTE – Courier services are not available to P.O. Box Addresses – Street addresses are required)

Fax to No. \_\_\_\_\_ (fax and destination address must be same as recipient)

Transcript request will not be processed for students with 'Holds' on their record.

**FOR BUSINESS OFFICE USE ONLY**

1<sup>st</sup> Transcript @ \$5.00 \_\_\_\_\_  
Each additional transcript @ \$3.00 \_\_\_\_\_  
Fax \_\_\_\_\_ Courier \_\_\_\_\_  
**Total Paid** \_\_\_\_\_

\_\_\_\_\_  
Student Signature

Signature of College Official: \_\_\_\_\_

PowerCampus updated:

White Copy – Records Department

Pink Copy – Business Office

Blue Copy – Student