**TRANSCRIPT REQUEST**

1. ***Students****:* ***Complete all information on this form as current. Send a copy of this form to ICIBC and send a copy to the educational institution attended in order for both parties to have current student and campus information.***
2. *The purpose of this form is to request formal transcripts from other educational institutions attended and have them forwarded directly to the ICIBC Main Campus in order to complete the student/faculty application process.*

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| --- | --- |
| **1. EDUCATIONAL INSTITUTION ATTENDED** | **2. SEND TRANSCRIPT TO CAMPUS ADDRESS** |
| NAME OF INSTITUTION | In Christ International Bible College |
| ADDRESS | c/o Mark Hankins Ministries |
| CITY | P.O. Box 12863 |
| STATE / PROVINCE | POSTAL CODE | COUNTRY | Alexandria, La. 71315 |
| **3. ICIBC EXTENSION CAMPUS** | **---------------------------------------------------------------** |
| CAMPUS CODE LAKE-LA-EXT  | CITY/STATELake Charles, LA  | EXT. CAMPUS DIRECTOR Pastor Kevin Burns | EXT. CAMPUS PHONE # |
| **4. STUDENT INFORMATION** | **---------------------------------------------------------------** |
| LAST NAME | FIRST NAME | MIDDLE INITIAL |
| SOCIAL SECURITY NUMBER | MAIDEN NAME (IF APPLICABLE) |  YEARS ATTENDED  | BIRTH-DATE  / / |
| CURRENT ADDRESS | CITY | STATE |
| POSTAL CODE | COUNTRY | HOME PHONE | CELL PHONE |
| STUDENT SIGNATURE | DATE |
| **5. TO THE APPLICANT***College credit will not be awarded for classes you have attended at ICIBC without proof of previous college attendance, high school graduation, or a G. E. D.* Send a copy of this form to ICIBC and each college you have attended to obtain your official sealed transcript. All official transcripts should be sent directly to the ICIBC Main Campus. Most colleges charge a small fee for transcripts, therefore the fee amount should accompany your request. Request your transcripts as soon as possible and send a copy of this form to ICIBC, as ICIBC needs your official transcript within 30 days of your application. If you have not attended college and do not have a copy of your high school diploma, complete a copy of this form and send it to your high school guidance office. |
| **6. FORM OF PAYMENT**❒ Visa ❒ Master Card ❒ Discover ❒ American Express ❒ Check ❒ Money OrderCredit Card #: \_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name on card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of transcripts requested: \_\_\_\_\_\_\_\_\_ Payment Amount: $\_\_\_\_\_\_\_\_\_\_\_ |

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