## **BARTON COMMUNITY COLLEGE Academic Transcript Request**

Date of	Request:
	No. of transcripts requested Send Now; <u>do not</u> hold for semester grades Hold for current semester grades Hold for degree

Address inquires to:



Barton County Campus Office of Enrollment Services 245 NE 30<sup>th</sup> Road Great Bend, KS 67530 (620) 792-9252 or (800) 748-7594 FAX: (620) 786-1175

	5 7542
	Maiden/Other Names
ate of Birth:	Marachy Other Names
	Zip:
count. The approp	priate fee must
Transcrints v	will be issued within
-	on receipt. Please
-	st two weeks at the
end of the te	erm or during peak
enrollment.	
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AWS - Pay Online C	Option
Authorizatio	
	allow at leas end of the te enrollment.