



## Transcript Request Form

Attention: Office of the Registrar

---

---

---

---

Please return this form with a copy of the official transcript to:

Attention: Office of Admissions  
Georgia Military College  
4201 N. Forrest St.  
Valdosta, Ga. 31605

I attended your institution from \_\_\_\_\_ To \_\_\_\_\_

My social security number is \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

My date of birth is \_\_\_\_\_

My maiden name is \_\_\_\_\_

My current mailing address is:

---

---

---

---

My Printed Name Is

---

My Signature

4201 North Forrest Street, Valdosta, Ga. 31605  
Voice: (229) 293-6000  
Fax: (229) 293-6001  
Revised 06/24/13