



OCONEE CHRISTIAN ACADEMY  
TRANSCRIPT REQUEST FORM



First and Last Name \_\_\_\_\_ DOB: \_\_\_\_\_

Class of \_\_\_\_\_

**Please send my official transcript at no charge to:**

College \_\_\_\_\_

Which decision type are you applying to and what is the deadline?

Early Action \_\_\_\_\_

Regular Decision \_\_\_\_\_

Early Decision \_\_\_\_\_

Rolling Decision \_\_\_\_\_

Address \_\_\_\_\_

Accepts Transcript via email: \_\_\_\_\_ yes \_\_\_\_\_ no (If YES, please provide email address)

Email to: \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

**\*\*OCA does not send SAT/ACT scores. You must request those be sent by the testing agency.\*\***

Test Agency Contact Information: (SAT [www.collegeboard.com](http://www.collegeboard.com) 1-866-756-7346; ACT [www.act.org](http://www.act.org) 1-319-337-1000)

***Please return the completed form to the front office***

**FOR OFFICE USE ONLY:**

**Date received: \_\_\_\_\_ by \_\_\_\_\_**

**Request completed on \_\_\_\_\_ by \_\_\_\_\_**

***A \$5.00 fee is required for the 2<sup>nd</sup> and all other transcript requests.***

First and Last Name \_\_\_\_\_ DOB: \_\_\_\_\_

Class of \_\_\_\_\_

**Please send a second official transcript for a \$5.00 fee to:**

College \_\_\_\_\_

Which decision type are you applying to and what is the deadline?

Early Action \_\_\_\_\_

Regular Decision \_\_\_\_\_

Early Decision \_\_\_\_\_

Rolling Decision \_\_\_\_\_

Address \_\_\_\_\_

Accepts Transcript via email: \_\_\_\_\_ yes \_\_\_\_\_ no (If YES, please provide email address)

Email to: \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

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