



*United Theological
College of the West
Indies*

7 Golding Avenue, P.O Box
136, Kingston Jamaica, W.I
Tel: (876) 927-1724, 927-2868
Fax: (876) 977-0812
Email:
unitheol@cwjamaica.com
Website: utcwi.edu.jm

TRANSCRIPT REQUEST FORM

- ◆ Request must be made in writing; telephone requests are not accepted.
- ◆ All financial obligations to the school must be satisfied. Failure to fulfill this requirement will result in the **non-processing** of the transcript.
- ◆ JA\$1000 or US\$12 for each transcript.
- ◆ Cash, Manager's cheques or credit/debit card payments are accepted.
- ◆ For additional transcripts, please complete separate forms.
- ◆ Allow **Ten** (10) working days for transcript production.

Name:		
Address:		
City, State, Zip:		
Telephone Number(s):		
College ID:		
Signature:		Date:
Check Programme pursued: <input type="checkbox"/> M.Div. <input type="checkbox"/> Diploma (Ministerial Studies) <input type="checkbox"/> Certificate <input type="checkbox"/> Other: -----	Please indicate if you were: <input type="checkbox"/> Denominational Sponsored <input type="checkbox"/> Independent	Last date you attended: <div style="border: 2px solid black; height: 40px; width: 100%;"></div>
Check form of payment: <input type="checkbox"/> Manager's Cheque <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Cash	Please indicate payment amount: _____	Please enter Cheque # _____ Or The last four digits of credit/debit card: _____
SEND TRANSCRIPT TO		
Name of Organisation/Institution:		
To the Attention of:		
Address:		
City, State, Zip		
FOR OFFICE USE ONLY:	Date Received:	Financial Approval: Date Issued: