



**TRINITY COLLEGE
OF FLORIDA
Transcript Request Form**

Instructions: Please complete this form and give it to your high school guidance office/counselor or college registrar to request your official high school and/or college transcripts be sent to the Admissions Office at Trinity College of Florida.

High School/College Information (to be completed by the student)

(Please Print)

High School/College Name

Address

City

State

Zip

Student Information (to be completed by the student)

(Please Print)

Name

SSN

Date of Graduation (MM/DD/YYYY)

Date of Birth (MM/DD/YY)

X Signature (required)

Date

The above named student has completed an application for admission to **Trinity College of Florida**.

Please mail transcripts to:

Trinity College of Florida
Admissions Office
2430 Welbilt Blvd
Trinity, FL 34655

Should you have any questions regarding this request, please contact the Trinity College of Florida Admissions Office at **800-388-0869** or **727-569-1411**.